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COUNTY BOROUGH OF EASTBOURNE

ANNUAL REPORT

OF THE

Medical Officer of Health

AND

Principal School Medical Officer

FOR

1956

ON THE

**HEALTH, WELFARE AND
SCHOOL HEALTH SERVICES**

KENNETH O. A. VICKERY, M.D., M.R.C.S., D.P.H.,

Medical Officer of Health

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HEALTH AND WELFARE SERVICES DEPARTMENT,
AVENUE HOUSE,

EASTBOURNE.

6th August, 1957.

*To His Worship the Mayor and to the Aldermen and Councillors
of the County Borough of Eastbourne.*

MR. MAYOR, LADIES AND GENTLEMEN,

I have the honour to present to you the sixty-fifth Annual Report on the state of the Public Health in Eastbourne. Also included is my Report as Principal School Medical Officer on the School Health Service.

The year has been marked by a number of new activities and services which are summarised below. These have been undertaken in addition to the maintenance of a full programme of existing services as detailed in the Report. It has been possible to achieve this without any increase whatever in the establishment of medical, administrative, and clerical staff, but only by keeping the work of the Department under constant review and adapting it to meet ever-changing medical and social requirements of the community.

JANUARY

Food Hygiene Regulations.—Commencement of extensive programme of visits to hotels, boarding houses, restaurants, cafes, and other food premises by public health inspectors.

Opening of library for health education visual aids including flannelgraphs, filmstrips, posters and leaflets.

APRIL

Occupation Centre.—Opening of new group for children under five years of age.

Avenue House.—Provision of new dental facilities, x-ray room and dark room, enabling on the spot examination of teeth of children, expectant and nursing mothers.

MAY

Poliomyelitis Vaccination.—Commencement of scheme for vaccination of children born 1947—1954.

SEPTEMBER

Opening of new child welfare clinic at Langney Community Centre.

OCTOBER

B.G.G. Vaccination.—Implementation of scheme for protection against pulmonary tuberculosis of 13-year-old children.

NOVEMBER

New Homes and Trades Exhibition, Winter Garden.—The erection, display and staffing of a thirty foot long stand for 10 days period of exhibition.

DECEMBER

Completion and bringing into use of Staveley Court Home for 44 residents.

In spite of the erection of a substantial number of new dwellings, by both local authority and private enterprise, it is surprising to find that the Registrar General's estimated mid-year population shows a rise of only 20 over the previous year.

The crude birth and corrected death rates showed an increase over the previous year, whilst the total number of deaths from vascular lesions of the nervous system, coronary disease, heart and circulatory diseases, was the highest ever recorded.

Infectious disease presented no major problems during the year. There was continued reduction in the number of cases of scarlet fever and whooping cough, although the measles epidemic which began the previous year continued until the middle of 1956. The most striking decline was in notifications of respiratory tuberculosis. The figure of 14 was the lowest recorded since these Reports began.

Poliomyelitis vaccination was made available in the spring for a proportion of children between the ages of two and nine. Publicity for the arrangements was given in the schools, clinics and the local press. Approximately 30 per cent. of parents with eligible children responded at once with signed consent forms. Sufficient vaccine was received to complete the vaccination of only about 10 per cent. of those registered, prior to a precautionary suspension of operations during the summer and autumn. Happily there were no significant reactions or disturbances resulting from the vaccine administered and, from the number of enquiries received later in the year, it was evident that there would be a brisk demand for vaccination in the new year.

During the autumn months the Council's approved scheme of B.C.G. vaccination for 13-year-old children was got under way. Most of the work was carried out in the schools and full details are given in the School Health Section of the Report. Nevertheless, B.C.G. vaccination is available for all children within the age group whether in Local Authority or private schools.

The report of the Central Health Services Council Standing Maternity and Midwifery Advisory Committee on Ante-Natal Care Related to Toxaemia was received during the year and, in accordance with the recommendation of the Ministry of Health which accompanied it, a meeting was held in Hastings in September between representatives of Hospital Management Committees, General Practitioners, and Local Health Authorities from Eastbourne, Hastings and parts of East Sussex. So far as the Local Health Authorities were concerned, the most useful result was the agreement reached that Local Health Authority health education facilities, by way of relaxation classes, instruction in mothercraft, hygiene, etc., should be encouraged and should receive the co-operation and support of general practitioners and hospitals. Steps have been taken to improve the Local Authority's ante-natal educational activities which, in view of the high rate of institutional confinements in the area, have so far embraced only those relatively few mothers who are booked for home delivery. We look forward to the implementation of the advice contained in the Advisory Committee's report to the effect that hospitals or family doctors might encourage their patients to use facilities provided by Local Health Authorities.

The stillbirth rate at 22.57 per thousand live births and stillbirths compared unfavourably with 19.50 for 1955, whilst the incidence of premature births consolidated over three-year averages has shown a steady rise since 1946. These tendencies give point to the Advisory Committee's emphasis on the importance of all aspects of ante-natal care in the prevention of toxaemia itself a known major cause of stillbirths and prematurity.

Health education continues to be the most important single task of the Department and was undertaken during the year without respite by medical officers, health visitors, public health inspectors, nurses, and midwives, supported by arrangements made and material produced by other members of the staff. We are fortunate in having the services of at least one health visitor who is a gifted artist. With her assistance, a valuable and much used library of visual aids has been built up. Colourful flannelgraphs, pictures, filmstrips, etc., are proving of increasing value having regard to the public's familiarity with television, coloured films, and illustrated magazines. Indeed, it is doubtful if formal literature or printed leaflet without illustration continues to make any useful impression in a picture-minded age.

There was considerable national publicity during the year to the mounting evidence linking smoking with the serious incidence of cancer of the lung. Whether or not smoking ultimately emerges as the cause or merely a localising or precipitating factor in subjects whose tissues are otherwise predisposed to cancer, dramatic

evidence of this type can be of great value in bringing home to the public that there is a direct relationship between personal living habits and health.

There is as yet a scant appreciation by the public of the connection between eating habits and health. My personal observation is that the most damaging bad habit in this respect is the excessive quantity of sugar consumed by the public and children in particular, in the many forms in which it is attractively marketed. In addition to the substantial quantities used in the preparation of meals in the household, it is consumed as sweets, ice-cream, chocolates, lollies, soft drinks, confectionery, and is commonest of all presents to children by well-meaning relations and friends. Whilst dental experts repeatedly testify to the ravages in the mouth caused by sugar, insufficient emphasis has been given to its general ill effects on the body, not the least of which is to pervert the palate and create a craving and habit almost as difficult to eradicate as that caused by tobacco and which robs the normal appetite for other foods. Where co-operative parents with ailing children have been able drastically to reduce sugar intake and substitute other refined carbohydrates with wholegrain cereals coupled with increased daily supplies of fresh fruit and vegetables, it has been my pleasure to observe striking improvements in child health including the abatement of symptoms arising from enlarged tonsils and adenoids.

The problem of the care of the aged demands more and more of the time of the Council's medical and welfare officers. The most difficult to deal with are those who fall within the unfortunate administrative gap between the provisions of the National Assistance Act and those of the National Health Services Act. There is good co-operation between the officers of the respective Authorities, but it not infrequently occurs that aged persons examined in consultation between the medical officers of the Local Authority and Hospital Management Committee cannot reasonably be assigned to a hospital bed in so far as they may be able at times to get up and about, nor can they be considered suitable for the Council's homes for the aged in so far as they may be incontinent, severely crippled, or significantly mentally disturbed. Eastbourne has been fortunate until the present time in having in effect a "half-way house" in the form of a voluntary home where nursing staff are employed and where more care and assistance can be given than is practicable in a Local Authority home.

The Council's third residential home, Staveley Court, came into service towards the close of the year. Its situation, convenience, and homely atmosphere would appear to justify the feasibility of the adaptation of suitable existing property for homes for the aged, nor is it felt that its relatively large number of beds—forty-four—justifies fears of an institutional atmosphere.

ACKNOWLEDGMENTS

The best wishes of the Council and the Department were extended to Miss K. M. Avis, who left during the year to take up an appointment with the World Health Organisation in India.

I would again renew my sincere appreciation of the work undertaken by members of the various voluntary organisations. The activities of a number are mentioned in the pages of this report, and I would like to refer especially to the St. John Ambulance Brigade and Superintendent Burnage not only for the first-class ambulance service which they provide on behalf of the Council, but also for the trained body of men and women always to be relied upon for routine or emergency; the British Red Cross Society who continue to provide a much used chiropody service for old people which is a valuable contribution towards keeping them active as long as possible; the Women's Voluntary Services who, among many activities, continued its valued meals on wheels service and provided voluntary helpers at each of the clinics throughout the year; the Society for the Social Welfare of the Blind in Eastbourne and the Eastbourne Voluntary Association for the Care of Cripples who continued to support the statutory responsibilities of the Council in the provisions for handicapped folk in the community.

I would like to thank you, Mr. Mayor, and Members of the Council for your unfailing interest and help during the year. My thanks are also similarly due to the Town Clerk and the Heads of Departments and their staffs.

Finally, to my own staff, without whose work and loyal support neither this report nor the activities contained herein would have been possible, I record my sincere thanks.

I am, Mr. Mayor, Ladies and Gentlemen,

Yours faithfully,

KENNETH VICKERY,

Medical Officer of Health.

PUBLIC HEALTH COMMITTEE

(as constituted at 31st December, 1956)

The Mayor:

ALDERMAN SYDNEY MORRIS CAFFYN, J.P.

Chairman:

COUNCILLOR W. E. HAFFENDEN

Deputy Chairman:

COUNCILLOR F. A. POPE

Councillors:

W. H. BENSON-DARE

J. B. COVENTRY

S. W. HOLDEN

MRS. W. L. LEE

W. A. NEALE

F. C. SOLLY

HEALTH SERVICES COMMITTEE

(as constituted at 31st December, 1956)

The Mayor:

ALDERMAN SYDNEY MORRIS CAFFYN, J.P.

Chairman:

COUNCILLOR J. B. COVENTRY

Deputy Chairman:

COUNCILLOR S. F. MARTIN

Councillors:

W. H. BENSON-DARE

MRS. E. V. F. FORDHAM

S. W. HOLDEN

A. G. E. JUDGE

MRS. W. L. LEE

S. R. TOMSETT

Co-opted Members:

MR. D. R. GENT—Eastbourne Executive Council

DR. J. EMSLIE—Eastbourne Local Medical Committee

MR. E. G. WATT—Eastbourne Hospital Management Committee

WELFARE SERVICES COMMITTEE

(as constituted at 31st December, 1956)

The Mayor:

ALDERMAN SYDNEY MORRIS CAFFYN, J.P.

Chairman:

ALDERMAN MISS E. M. THORNTON, J.P.

Deputy Chairman:
COUNCILLOR R. A. WATMORE

Alderman:
MISS G. L. PARKER

Councillors:
T. A. ALSTON
J. B. COVENTRY
W. P. LEBBON
MRS. W. L. LEE
G. A. RAINEY, J.P.

COMMITTEES

The regular business of the respective Committees remained as set out in my Annual Report for 1953.

PUBLIC HEALTH DEPARTMENT STAFF

Medical Officer of Health:
KENNETH O. A. VICKERY, M.D., B.S. (LOND.), M.R.C.S., L.R.C.P., D.P.H.

Deputy Medical Officer of Health:
ERIC W. WRIGHT, M.B., Ch.B., D.P.H.

Assistant Medical Officer of Health:
MARJORIE I. GODSON, M.B., Ch.B.

Chief Dental Officer:
M. G. BERRY, L.D.S., R.C.S.

Assistant Dental Officer:
J. W. MARTIN, L.D.S.

Chief Public Health Inspector:
ARTHUR LINDFIELD, Cert. R.S.I.

Deputy Chief Public Health Inspector:
F. T. RIPPIN, Cert. S.I.B.

Public Health Inspectors:
G. N. RICHARDS, Cert. S.I.B.
L. G. HOWARD, Cert. S.I.B.
J. N. CONNELL, Cert. S.I.B.
A. MATTHEWS, Cert. S.I.B.
R. G. MORLEY (Pupil Health Inspector) (from 16.7.56)

Superintendent of Home Nursing Service and Non-Medical Supervisor of Midwives:
MISS I. MORLEY, S.R.N., S.C.M., Q.N.

Domiciliary Nurses:
(a) *Whole-time:*

MISS R. N. ANDREWS, S.R.N., Q.N.
MRS. I. BOOTHROYD, S.R.N., S.R.F.N., Q.N.
MRS. E. A. G. CHAPMAN, S.R.N. (from 24.9.56)
MRS. W. G. HARRIOTT, S.R.N.
MISS M. A. GETHEN, S.R.N., Q.N.
MR. G. J. W. HUNT, S.R.N., Q.N.
MRS. J. E. JERRATT, S.R.N., Q.N. (Senior)
MRS. G. M. MEEN, S.R.N.
MRS. F. A. PURCHASE, S.R.N.
MRS. J. E. RAINSLEY, S.R.N.

Mrs. P. M. RANSOM, S.R.N., Q.N.
Mr. A. ROTCHELL, S.R.N., Q.N.
Mrs. N. SPENCE, S.R.N., S.C.M., Q.N.
Miss A. M. WILLIS, S.R.N., S.C.M., Q.N.
Miss E. WOODS, S.R.N.

(b) Part-time:

Miss D. EZZARD, S.R.N., S.C.M., Q.N. (Part-time Home Nurse and Midwife)
Mrs. J. S. MILLICHAMP, S.E.A.N.
Mrs. E. B. PILCHER, S.E.A.N.
Mrs. M. E. SCOTT, S.E.A.N.
Mrs. A. M. URIDGE, S.E.A.N.

Domiciliary Midwives:

Miss M. A. BENNETT, S.C.M.
Miss F. M. SCAMMELL, S.R.N., S.C.M.
Miss D. EZZARD, S.R.N., S.C.M., Q.N. (Part-time Midwife and Home Nurse)

Senior Health Visitor:

Miss K. M. AVIS, S.R.N., H.V. Cert., Public Health Nursing Administrative Certificate (to 20.9.56)
Mrs. S. M. JAMES, S.R.N., H.V. Cert. (from 21.9.56)

Health Visitors:

Miss J. C. M. BERK, S.R.N., H.V. Cert.
Miss E. L. CLARK, S.R.N., H.V. Cert.
Mrs. W. CLEMENTS, S.R.N., S.C.M., H.V. Cert. (to 13.1.56)
Mrs. D. I. DALE, S.R.N., S.C.M., H.V. Cert. (from 1.2.56)
Mrs. L. FOSTER, S.R.N., S.C.M., H.V. Cert.
Miss E. E. GRIFFIN, S.R.N., S.C.M., H.V. Cert.
Miss M. G. HEMMING, S.R.N., H.V. Cert.
Miss B. J. HUDSON, S.R.N., S.C.M., H.V. Cert. (from 6.2.56)
Mrs. S. M. JAMES, S.R.N., H.V. Cert. (to 20.9.56)
Miss M. J. PARTRIDGE, S.R.N., S.C.M., H.V. Cert.

Home Teacher of the Blind:

Mrs. L. E. HOUNSOM, H.T. Cert. (to 14.11.56)
Miss D. S. MACEY, Dipl. of H.T. for Blind (from 3.12.56)

Senior Duly Authorised Officer and Welfare Services Officer:

V. O. F. LITTLE

Duly Authorised Officer and Assistant Welfare Officer:

H. A. HURT

Duly Authorised Officer and Female Mental Health Worker:

Miss N. G. FULLER

Part-time Duly Authorised Officer:

Miss K. M. AVIS, S.R.N., H.V. Cert. (to 20.9.56)
Mrs. L. FOSTER, S.R.N., S.C.M., H.V. Cert. (from 1.10.56)

Clerical Staff:

A. H. HOOKHAM, F.R.Met.Soc. (Chief Lay Administrative
E. TARBUCK Officer)
W. L. PECK
C. A. HEMSLEY
Miss G. E. WOODS
Miss D. M. BEETLESTONE

Miss M. S. HARDY
 Mrs. V. HARDY-KING
 Mr. J. McLEOD (to 22.5.56)
 Miss V. M. RANGER
 Miss D. J. PARK
 Miss J. HARRIOTT
 Miss J. E. J. CUCKNEY
 Mrs. S. M. MANNING (to 4.2.56)
 Miss P. A. HILL (13.2.56 to 31.8.56)
 Miss S. SPRINGFORD (from 3.8.56)

Dental Attendants:

Mrs. D. S. ANDREWS (to 7.1.56)
 Miss D. D. SIDLEY
 Miss A. SLADE

Chest Physician (Part-time):

A. H. FERGUSON GOW, M.R.C.S., L.R.C.P.
 (Chest Physician, S.E. Metropolitan Regional Hospital Board)

Public Analyst:

R. F. WRIGHT, B.Sc. (Lond.), A.R.C.S., F.R.I.C.

Occupation Centre, Salehurst Road:

Miss D. S. LONES - *Supervisor*

Princes Park Day Nursery

Miss M. J. KENNEDY - *Matron*

STAFF OF PUBLIC HEALTH DEPARTMENT

(31st December, 1956)

	<i>Full-time</i>	<i>Part-time</i>	<i>Total</i>
Medical Officer of Health, Deputy and Assistant	3	—	3
Dental Officers	2	—	2
Clerical Staff, including School Health and Home Nursing Services	16	—	16
Dental Attendants	2	—	2
Public Health Inspectors	6	—	6
Health Visitors	9	—	9
Home Nurses (including Superintendent) ..	16	5	21
District Nurse/Midwife	1	—	1
Domiciliary Midwives	2	—	2
Blind Visitor	1	—	1
Welfare Officer and Authorised Officers ..	3	—	3
Day Nursery	9	5	14
Occupation Centre	3	1	4
Old People's Homes	28	9	37
The Knowle (Home for Temporary Homeless)	2	—	2
Old Town and Seaside Baths	7	1	8
Domestic Helps	4	22	26
Rodent Operators	2	—	2
Others—i.e. Cleaners, Caretakers, Van Driver	3	5	8
	119	48	167

The duties of the Senior Public Health Officers remained as set out in my Annual Report for 1953.

SECTION A

GENERAL

Vital Statistics

Notification of Births

General Information—National and Social Conditions

Meteorology

VITAL STATISTICS

Estimated Mid-Year Population—57,850

BIRTHS:

			<i>Male</i>	<i>Female</i>	<i>Total</i>
Live Births—Legitimate	...	...	274	261	535
Illegitimate	...	...	15	13	28
			<hr/> 289	<hr/> 274	<hr/> 563
Still Births—Legitimate	1	11	12
Illegitimate	—	1	1
			<hr/> 1	<hr/> 12	<hr/> 13

DEATHS:

All causes	393	543	936
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						<i>England Eastbourne and Wales</i>
Live Birth Rate per 1,000 population	...				9.73	15.7
Still Birth Rate per 1,000 live and still births	...	...	...	...	22.57	23.0
Birth Rate after applying "Area Comparability Factor"	...	...	...	...	11.09	—
Death Rate (Crude) per 1,000 population	...				16.8	11.7
Death Rate after applying "Area Comparability Factor"	...	...	...	...	10.68	—
Number of Deaths from Tuberculosis	...				8	5,373
Tuberculosis Death Rate per 1,000 population	...	...	...	...	0.14	0.12
Maternal Mortality:						
Number of Maternal Deaths	...	...			nil	401
Rate per 1,000 Live and Still Births	...				0.00	0.56
Deaths of Infants under 1 year of age	...				8	16,471
Death Rate of Infants under 1 year of age:						
All infants per 1,000 Live Births	...				14.21	23.8
Legitimate infants per 1,000 Legitimate Live Births	...	...	...	...	14.96	—
Illegitimate infants per 1,000 Illegitimate Live Births	...	...	...	...	0.00	—

CAUSES OF DEATH

	<i>Males Females</i>		<i>Total</i>
Tuberculosis, respiratory	3	3	6
Tuberculosis, other	1	1	2
Syphilitic disease	1	1	2
Meningococcal infection	—	1	1
Other infectious and parasitic diseases ...	2	—	2
Malignant neoplasm, stomach	6	4	10
Malignant neoplasm, lung, bronchus ...	22	6	28
Malignant neoplasm, breast	—	16	16
Malignant neoplasm, uterus	—	7	7
Other malignant and lymphatic neoplasms ...	45	46	91
Leukaemia, aleukaemia	1	1	2
Diabetes	1	4	5
Vascular lesions of the nervous system ...	58	120	178
Coronary disease, angina	71	70	141
Hypertension with heart disease	6	11	17
Other heart disease	78	132	210
Other circulatory disease	12	24	36
Influenza	2	3	5
Pneumonia	12	15	27
Bronchitis	14	6	20
Other diseases of the respiratory system ...	9	—	9
Ulcer of stomach and duodenum	6	3	9
Gastritis, enteritis and diarrhoea	1	4	5
Nephritis and nephrosis	4	4	8
Hyperplasia of prostate	7	—	7
Congenital malformations	1	2	3
Other defined and ill-defined diseases ...	21	39	60
Motor vehicle accidents	2	—	2
All other accidents	5	14	19
Suicide	2	6	8
	<hr/> 393	<hr/> 543	<hr/> 936
	<hr/>	<hr/>	<hr/>

AGE MORTALITY

	<i>Males Females</i>		<i>Total</i>
Under 1	5	3	8
1-5	1	2	3
5-15	—	—	—
15-25	1	2	3
25-45	10	12	22
45-65	78	64	142
65-75	108	132	240
75 and over	190	328	518
	<hr/> 393	<hr/> 543	<hr/> 936
	<hr/>	<hr/>	<hr/>

MATERNAL, INFANTILE AND CHILD MORTALITY

No Eastbourne mother died from any cause associated with pregnancy or childbirth.

The deaths occurred of eight infants, five males and three females under one year of age. One of this number was the non-transferable death of a child normally resident in Dalkeith. Three others occurred in London hospitals.

Three children died between the ages of one and five years.

Details are as follows:

DEATHS OF INFANTS UNDER ONE YEAR OF AGE

<i>Age</i>	<i>Sex</i>	<i>Where died</i>	<i>Cause of death</i>
5 hours	M.	St. Mary's Hospital	I (a) Non-expansion of the lungs. II Non-closure of inter-auricular.
1 day	M.	St. Mary's Hospital	I (a) Prematurity (b) Pulmonary Atelectasis
2 days	M.	St. Mary's Hospital	I (a) Prematurity and non-expansion of the lower lobe of the right lung.
2 days	F.	King Edward VII Hosp., Old Windsor	I (a) Pulmonary Atelectasis. P.M.
5 days	F.	Maternity Home	I (a) Prematurity (b) Atelectasis.
3 mths.	M.	Children's Hospital, Gt. Ormond Street, Holborn	Congenital Heart Disease. Transportation of great vessels. (Operation repair.) P.M.
5 mths.	M.	Hayling Island	Inhalation of stomach contents. Accidental death. Inq. P.M.
7 mths.	F.	Children's Hospital, Gt. Ormond Street, Holborn	Congenital Heart Disease. Ventricular septal defect. (Operation — closure of defect.) P.M.

DEATHS OF CHILDREN AGED ONE TO FIVE YEARS

<i>Age</i>	<i>Sex</i>	<i>Where died</i>	<i>Cause of death</i>
1 year	M.	St. Mary's Hospital	I (a) Acute Enteritis.
2 years	F.	Heatherwood Hospital, Sunninghill, Windsor	I (a) Asphyxia (mechanical) (b) Inhalation of regurgitated gastric contents. II Congenital dislocation of left hip. P.M.
4 years	F.	St. Mary's Hospital	I (a) Meningitis due to Haemophilus Influenzae.

MATERNAL AND INFANTILE MORTALITY 1894-1956

<i>Years</i>				<i>Infant Deaths</i>	<i>Infantile Mortality Rate</i>	<i>Maternal Deaths</i>	<i>Maternal Mortality Rate</i>
1894-1903 Average ..	..			108.5	118.2	3.6	4.56
1904-1913 Average ..	..			79.3	96.6	2.6	2.91
1914-1923 Average ..	..			52.3	68.8	1.5	1.93
1924-1933 Average ..	..			30.0	45.7	1.5	2.20
1934-1943 Average ..	..			23.6	42.40	2.1	3.72
1944-1953 Average ..	..			17.4	23.42	1	1.25
1954 .. .. .	..			8	13.07	—	—
1955 .. .. .	..			10	18.08	1	1.76
1956 .. .. .	..			8	14.21	—	—

DEATHS FROM CANCER

The following table shows the number of deaths and death rates from cancer from 1939 to 1956:

	<i>Year</i>	<i>Population</i>	<i>Age Groups</i>						<i>Total Deaths</i>	<i>Death Rate per 1,000 Population</i>
			0-1	1-5	5-15	15-45	45-65	65 over		
Ten Years	1939	59,470	—	—	1	12	69	30	112	1.88
	1940	53,760	—	1	—	4	37	53	95	1.76
	1941	27,570	—	—	—	1	24	48	73	2.64
	1942	30,960	—	—	—	4	30	48	82	2.68
	1943	27,380	—	—	—	3	29	52	84	3.06
	1944	27,980	—	—	—	2	26	67	95	3.43
	1945	39,300	—	1	—	6	43	79	129	3.28
	1946	49,790	—	—	—	4	54	69	126	2.53
	1947	53,540	—	—	—	7	31	87	125	2.33
	1948	56,610	—	1	1	5	35	92	134	2.36
	Total	—	—	3	2	48	378	624	1,055	—
Eight Years	1949	56,880	—	—	—	9	40	79	128	2.25
	1950	58,050	—	—	—	9	54	100	163	2.80
	1951	57,510	—	—	1	4	46	77	128	2.22
	1952	57,200	—	—	—	4	46	94	114	2.51
	1953	57,190	—	—	—	8	55	85	149	2.61
	1954	57,600	—	—	—	4	33	96	133	2.30
	1955	57,830	—	1	—	3	51	113	168	2.91
	1956	57,850	—	—	—	5	46	103	154	2.66
	Total	—	—	1	2	46	371	747	1,167	—

NOTIFICATION OF BIRTHS

Nine hundred and twenty-six live births and twenty still births took place in the Borough and were notified to the Local Authority. Five hundred and fifty-nine live births and thirteen still births were to mothers resident in Eastbourne and three hundred and sixty-seven live births and seven still births were to mothers resident outside the Borough. In addition there were three inward transfers of live births relating to Eastbourne mothers confined elsewhere than in Eastbourne.

ANALYSIS OF NOTIFICATIONS

	<i>Residents</i>		<i>Non-Residents</i>		<i>Total</i>		<i>Total</i>
	<i>Live Births</i>	<i>Still Births</i>	<i>Live Births</i>	<i>Still Births</i>	<i>Live Births</i>	<i>Still Births</i>	<i>All Births</i>
DOMICILIARY:							
Local Authority Midwives	89	2	1	—	90	2	92
Midwives in Private Practice	2	—	—	—	2	—	2
Other	—	1	—	—	—	1	1
Inward Transfer ..	1	—	—	—	1	—	1
Total Domiciliary ..	92	3	1	—	93	3	96
INSTITUTIONAL:							
Maternity Home ..	379	5	107	—	486	5	491
St. Mary's Hospital ..	87	5	256	7	343	12	355
Nursing Homes ..	2	—	3	—	5	—	5
Inward Transfer ..	2	—	—	—	2	—	2
Total Institutional ..	470	10	366	7	836	17	853
Total All Births	562	13	367	7	929	20	949
Notified Births: 1955 ..	543	12	361	7	904	19	923
1954 ..	604	10	349	9	953	19	972
1953 ..	632	8	313	4	945	12	957
1952 ..	623	17	288	9	911	26	937

GENERAL INFORMATION, NATURAL AND SOCIAL CONDITIONS

SITUATION: Latitude 50° 46' N.: Longitude 0° 17' E.

Eastbourne is situated on and at the foot of the eastern slope of the South Downs facing the English Channel with an open exposure South and South-East.

ELEVATION

The highest point is about 640 feet above sea level on the Downs sloping from the west to a minimum of 6·58 feet above highest mean sea level in the east of the Borough.

AREA

The acreage of the Borough is 11,356 acres including foreshore (332 acres) and inland water (19 acres).

DENSITY OF POPULATION

Approximately 5 persons per acre. The parts built over vary with locality from 10 to 50 with an average of about 20 persons per acre.

NUMBER OF SEPARATE ASSESSMENTS 21,390.

RATEABLE VALUE at 1.4.56. £1,428,904.

GENERAL RATE. 12s.

PRODUCT OF A 1d. RATE. £5,721.

METEOROLOGY: 60 Years Averages.

<i>Temperature:</i>	Max.	55·9° F.
	Min.	45·5° F.
	Mean	50·7° F.
	Sea	51·9° F.
<i>Sunshine:</i>	Total	1811·9 hours
	Daily	4·96 hours
<i>Rainfall:</i>	Total	31·25 inches
	Days	165

A description of climate, natural features and geology of Eastbourne is to be found in the 1955 Report of this Series.

VISITORS TO EASTBOURNE

All the many services of the department including the Home Nursing Service were made as freely available to visitors as staffing would permit without detriment to local residents.

Numerous enquiries from all over the British Isles regarding climate, nursing homes and the suitability of Eastbourne for retirement in relation to specific disabilities were answered.

One of the most frequent enquiries was for names of privately operated Convalescent Homes (excluding Nursing Homes). It has been a matter of some disappointment to reply that there is none. It would appear that private enterprise has missed a potentially rewarding opportunity in failing to provide a Convalescent Home on the sea front—which is the situation most often specified.

METEOROLOGY

Borough Meteorologist: A. H. HOOKHAM, F.R.Met.Soc.

SUNSHINE

The total of 1768·5 hours placed Eastbourne 22nd in the official list. Sunshine was below average during June to September inclusive as well as in December.

TEMPERATURE

Day temperatures were above average for January, May, September and December only. The night temperatures for May, July, September and December were also above average.

SEA TEMPERATURE

Apart from January which was above the average, and May being equal to the average, all other months were below.

RAINFALL

The months of June to September inclusive were above the average as well as for January and December.

SUMMARY OF OBSERVATIONS

AIR PRESSURE: (*Mean Sea Level*)

Daily Average

Inches

9 a.m.

30·062 (1018·0 millibars).

9 p.m.

30·056 (1017·8 millibars).

AIR TEMPERATURE:

Daily Average

Degrees

Maximum

54·6 degrees

Minimum

44·4 degrees

Combined

49·5 degrees

Range

10·2 degrees

At 9 a.m.

50·1 degrees

At 9 p.m.

48·8 degrees

Warmest Day—25th July

74 degrees

Warmest Night—9th July

62 degrees

Coldest Day—Feb. 2nd

23 degrees

Coldest Night—Feb. 2nd

15 degrees

EARTH TEMPERATURES

Daily Averages

At 1 foot

51·2 degrees

At 4 feet

52·4 degrees

SUNSHINE:

Total

1768·5 hours

Daily Average

4·80 hours

RAINFALL:

Total

28·19 inches

“Rain” days

162

HUMIDITY:

Daily Averages

9 a.m.

83 degrees

9 p.m.

87 degrees

WINDS:

Percentage of 9 a.m. and 9 p.m. observations.

<i>Direction</i>	<i>Percentage</i>
N.	17.76
N.E.	7.51
E.	8.47
S.E.	7.38
S.	6.97
S.W.	5.60
W.	30.60
N.W.	12.57
CALM	3.14

Prevailing Winds — West.

Snow and sleet recorded on	14 days
Thunderstorms recorded on	12 days
Fog (9 a.m.) recorded on	7 days
Gales recorded on	1 day
Air frost recorded on	46 days
Ground frost recorded during	65 nights

SUNSHINE

The positions of the Resorts in Southern districts in the Air Ministry list were:

<i>Position in List</i>	<i>Town</i>					<i>Total Hours</i>
1	Shanklin	...	...	...	...	1914.0
2	Weymouth	...	...	...	...	1869.9
3	Ventnor	...	...	...	...	1837.2
5	Torquay	...	...	...	...	1827.9
6	Poole	...	...	...	...	1816.1
7	Swanage	...	...	...	...	1810.3
8	Bournemouth	...	...	...	...	1808.5
9	Scilly Isles	...	...	...	...	1806.4
11	Penzance	...	...	...	...	1797.0
13	Sandown	...	...	...	...	1785.7
17	Exmouth	...	...	...	...	1775.6
22	EASTBOURNE	...	...	...	...	1768.5
23	Plymouth	...	...	...	...	1755.5

<i>Position in List</i>	<i>Town</i>					<i>Total Hours</i>
25	Falmouth	...	...	...	...	1739·9
26	Worthing	...	...	...	...	1726·7
27	Littlehampton	...	...	...	...	1726·3
28	Bognor	...	...	...	...	1722·1
29	Portsmouth	...	...	...	...	1714·5
31	Ilfracombe	...	...	...	...	1712·3
35	Teignmouth	...	...	...	...	1690·1
36	Seaford	...	...	...	...	1687·4
37	Margate	...	...	...	...	1686·6
38	Brighton	...	...	...	...	1686·3
39	Ryde ...	...	...	...	...	1682·6
40	Hastings	...	...	...	...	1679·4
44	Paignton	...	...	...	...	1663·5
47	Sidmouth	...	...	...	...	1653·7
49	Exeter	...	...	...	...	1650·7
53	Bexhill-on-Sea	...	...	...	...	1641·0
58	Ramsgate	...	...	...	...	1631·0
61	Folkestone	...	...	...	...	1616·4
67	Dover	...	...	...	...	1590·8

MONTHLY AVERAGES

		Air Temperature						Sunshine		Rainfall	
Month		Means of			High- est	Low- est	Mean Sea Tem- pera- ture	Total Hours	Daily Hours	Inches	'Rain' Days
		Maxi- mum	Mini- mum	Max. and Min. Com- bined							
January	..	46·3	36·8	41·5	51	23	43·8	74·7	2·41	5·52	20
February	..	36·3	26·9	31·6	48	15	36·3	93·0	3·21	0·47	11
March	..	47·8	38·0	42·9	57	27	40·0	178·1	5·42	0·54	11
April	..	51·3	38·3	44·8	60	30	45·6	182·4	6·08	1·28	10
May	..	60·6	47·1	53·9	73	38	52·8	279·7	9·02	0·35	8
June	..	61·9	51·4	56·7	72	45	57·0	169·6	5·65	2·43	13
July	..	65·9	56·5	61·2	74	50	61·5	195·3	6·30	2·97	12
August	..	65·1	54·0	59·5	71	46	61·4	212·9	6·87	4·52	23
September	..	64·8	55·6	60·2	70	50	60·5	146·2	4·87	3·44	12
October	..	57·5	46·0	51·7	64	36	55·3	128·4	4·14	1·26	12
November	..	49·0	39·9	44·5	56	27	46·8	84·3	2·81	1·13	12
December	..	48·8	42·1	45·5	54	31	45·7	23·9	0·77	4·28	18
YEAR	..	54·6	44·4	49·5	74 July	15 Feb.	50·5	1768·5	4·80	28·19	162

1956 Monthly Variations from Averages.

TEMPERATURE

		Maximum °F.	Minimum °F.	Sea °F.	Sunshine Hours	Rainfall Inches
January	..	+1.1	-0.4	+1.4	+12.7	+2.61
February	..	-9.1	-9.6	-4.9	+9.30	-1.82
March	..	-0.4	-0.1	-2.8	+41.1	-1.72
April	..	-1.6	-3.1	-1.2	+ 3.3	-0.69
May	..	+1.6	+0.2	0.0	+44.8	-1.29
June	..	-2.2	-0.8	-1.6	-68.4	+0.66
July	..	-1.3	+0.6	-1.0	-41.0	+0.77
August	..	-2.5	-2.3	-2.3	- 5.8	+2.04
September	..	+0.1	+2.7	-0.7	-27.4	+1.04
October	..	-0.5	-1.2	-0.4	+ 7.0	-2.65
November	..	-2.3	-2.0	-3.0	+12.1	-2.71
December	..	+1.9	+3.5	-0.5	-30.3	-0.83
YEAR	..	-1.3	-1.1	-1.4	-42.6	-3.06

Averages: 60 Years: 1888 to 1941 and 1947 to 1952.

Month		Air Temperature			Mean Sea Tem- pera- ture	Sunshine		Rainfall	
		Means of				Total Hours	Daily Hours	Inches	'Rain' Days
		Maxi- mum	Mini- mum	Max- and Min. Com- bined					
January	..	45.2	37.2	41.2	42.4	62.0	2.00	2.91	17
February	..	45.4	36.5	41.0	41.2	83.7	2.99	2.99	14
March	..	48.2	38.1	43.1	42.8	137.0	4.42	2.26	14
April	..	52.9	41.4	47.1	46.8	179.1	5.87	1.97	13
May	..	59.0	46.9	53.0	52.8	234.9	7.58	1.64	11
June	..	64.1	52.2	58.1	58.6	238.0	7.93	1.77	10
July	..	67.2	55.9	61.6	62.5	236.3	7.62	2.20	11
August	..	67.6	56.3	61.9	63.7	218.7	7.05	2.56	13
September	..	64.7	52.9	58.8	61.2	173.6	5.79	2.40	12
October	..	58.0	47.2	52.6	55.7	121.4	3.92	3.91	16
November	..	51.3	41.9	46.6	49.8	72.2	2.41	3.84	16
December	..	46.9	38.6	42.8	45.2	54.2	1.75	3.45	18
YEAR	..	55.9	45.5	50.7	51.9	1811.1	4.96	31.25	165

SECTION B

NATIONAL HEALTH SERVICE ACT

(LOCAL HEALTH SERVICES)

Health Services: Financial Statistics

Section 22—Care of Mothers and Young Children

- „ 23—Midwifery
- „ 24—Health Visiting
- „ 25—Home Nursing
- „ 26—Vaccination and Immunisation
- „ 27—Ambulance Service
- „ 28—Prevention of Illness, Care and After Care
- „ 29—Domestic Help
- „ 51—Mental Health

HEALTH SERVICES STATISTICS

The total gross expenditure on the Health Services during the financial year ended 31st March, 1956, was £65,618 towards which an exchequer grant of £27,208 was received. After deducting other income the net rate borne expenditure was £28,782 representing £498 14s. 0d. per 1,000 population compared with an average expenditure of £494 14s. 0d. per 1,000 population for all County Boroughs.

The figures of expenditure have been obtained from the Borough Treasurer's Abstract of Account and unit costs from the Return of Local Health Services Statistics published by the Institute of Municipal Treasurers and Accountants (Incorporated).

SECTION 22—CARE OF MOTHERS AND YOUNG CHILDREN

1. *Ante-Natal and Post-Natal Care*

Ante-natal clinics for expectant mothers having their confinement at home were provided at the Local Authority's Central Clinic, Avenue House (Wednesdays 2.30 p.m.) and at one district clinic, Hampden Park Hall (Tuesday 2.30 p.m.). Facilities for the post-natal care of mothers are available at Avenue House on Wednesdays in conjunction with the ante-natal clinic.

Sessions and attendances were as follows:

<i>(a) Ante-natal and Post-natal Clinics.</i>				<i>Sessions.</i>	<i>Attendances.</i>
Avenue House	...	...	...	64	407
Hampden Park Hall	...	...	...	50	197
TOTALS				114	604

Number of mothers attending	...	...	...	102
Number of new cases	...	...	...	88
Number of cases examined by Medical Officer	...	...	...	14
Number of specimens of blood taken for Rh. Factor	...	...	...	101
Number accepting invitation to attend Local Authority's Dental Centre	...	...	...	22
Number referred for x-ray	...	...	...	3
Number referred to own doctor	...	...	...	28
Attendances at post-natal clinic	...	...	...	nil.

(b) Home Visits by Domiciliary Midwives.

Visits to expectant mothers in their own homes	...	...	...	816
„ „ mothers confined at home	...	...	...	132
„ „ mothers confined in hospitals and discharged before the 14th day	...	...	...	79

2. Home Visiting by Health Visitors.

Visits by Health Visitors during the year were as follows:

	<i>First Visits</i>	<i>Total Visits</i>
To expectant mothers	243	297
To children under one year of age	569	3041
To children between the ages of one and two years	—	2144
To children between the ages of two and five years	—	3900

3. Child Welfare Clinics.

These were held at the following times:

Avenue House—Monday afternoons, Thursday mornings.
 Acacia Villa, Seaside—Tuesday afternoons.
 120-122 Green Street—Wednesday afternoons.
 Langney Village Community Centre—Thursday afternoons.
 Hampden Park Hall—Friday afternoons.

Commencing in January a Child Welfare Clinic was opened in temporary accommodation at Langney Church Hall. This clinic was transferred to Langney Village Community Centre following the official opening in September.

Attendances were:

	<i>Born in</i> 1956	<i>Born in</i> 1955	<i>Born in</i> 1951-1954	<i>Total</i>
Number of children who attended during the year	404	371	576	1351
	<i>Aged</i> <i>Under 1</i>	<i>Aged</i> 1-2	<i>Aged</i> 2-5	<i>Total</i>
Number of attendances made by children	6731	1356	1168	9255

4. *Care of Premature Infants* (i.e. babies weighing 5½ lb. or less at birth irrespective of period of gestation).

Equipment is provided by the Department for the care of premature infants born at home and very satisfactory provision is available in the hospitals.

(a) *Number of premature live births notified:*

<i>Place of Birth.</i>	<i>Resident</i>	<i>Non-Resident</i>	<i>Total</i>
Own Home	5	—	5
Maternity Home	15	3	18
St. Mary's Hospital ...	9	21	30
	—	—	—
	29	24	53
	—	—	—

(b) *Deaths of Premature Infants within 28 days:*

<i>(i) Died in first 24 hours:</i>	<i>Resident</i>	<i>Non-Resident</i>	<i>Total</i>
St. Mary's	—	2	2
Maternity Home	—	—	—
<i>(ii) Died within 1-28 days:</i>			
St. Mary's Hospital ...	2	1	3
Maternity Home	1	—	1
	—	—	—
	3	3	6
	—	—	—

5. *Unmarried Mothers*

Under the Authority's scheme for the welfare of unmarried mothers and their children full use was made of the services of the welfare workers and the Homes provided by the Chichester Diocesan Moral Welfare Association. All cases were fully investigated by the staff of the Department in association with the voluntary welfare workers and close contact was maintained with the girls concerned.

On discharge from Maternity Units and Post-Natal Hostels, all possible help was given to them.

House of the Good Shepherd. This Home has accommodation for eight single girls, including expectant mothers in need of care and supervision.

Twenty-five expectant mothers were admitted during the year, three of whom were Eastbourne girls accommodated for a total of 194 days.

Bell Hostel. This Hostel has 16 beds for accommodating unmarried mothers and their babies. There were 50 admissions. This Authority was not responsible financially for any of these cases.

Other Homes. Two Eastbourne girls were accommodated in other Homes and Hostels under the auspices of the Chichester Diocesan Moral Welfare Association for a total period of 247 days. One other girl was sent to the Southwark Catholic Rescue Society Home for a period of 12 weeks.

6. *Welfare Foods and Other Nutrients*

Arrangements for distribution have continued to run smoothly, the main centre for distribution being the Local Authority's central Welfare Clinic at Avenue House, which was available to the public daily during the full period the department was open. The four outlying Child Welfare Centres were used as subsidiary distribution centres during the normal clinic sessions there.

Under the Authority's arrangements for the care of mothers and young children a considerable variety of dried milk foods, cereals and vitamin products are now available for re-sale. These are issued on the recommendation of the Medical Officer or Health Visitor in attendance at the Child Welfare sessions.

7. *Dental Care*

The service is provided for the dental care of expectant and nursing mothers and pre-school children.

REPORT OF THE CHIEF DENTAL OFFICER

Fifty-four sessions were devoted to the inspection and treatment of expectant and nursing mothers and to children under the age of five. Eighty-one expectant and nursing mothers were seen at the Avenue House Clinic and made 215 attendances. Of these, 73 were found to require treatment and 60 were treated.

Sixty fillings were inserted and 42 teeth extracted. In addition, 8 full dentures and 14 partial dentures were fitted, the laboratory work being carried out by local technicians in their own laboratories. As the department now has its own x-ray apparatus, any cases needing radiological examination were dealt with at the clinic and not referred as in previous years to the radiological department at St. Mary's Hospital.

Two hundred and thirty-five children under school age were inspected and 147 were found to require treatment. Of these, 142 were actually treated and made 266 attendances. Sixty-one fillings were inserted into temporary teeth and 168 temporary teeth were extracted. A general anaesthetic was administered on 92 occasions, the anaesthetic used being either nitrous oxide and oxygen from a McKesson apparatus, or Vinesthene (vinyl ether) from an Oxford inhaler. In addition, 47 temporary teeth received conservative treatment with silver nitrate.

At the annual conference of the British Dental Association held at Brighton in June considerable time was given to the question of Dental Health Education. It was pointed out by many speakers that the task of organising a national campaign would prove such a vast and expensive undertaking that it could only be accomplished by enlisting, under the guidance and authority of the Ministry of Health, the many experts in the field of mass education. Special emphasis was also made on the immense difficulties likely to be encountered in attempting to produce fundamental changes in the national eating habits in order to reduce dental disease.

A time of national financial stringency is probably regarded as inopportune for the launching of any large-scale dental health campaign. Every effort therefore should be made to ensure that any limited resources available are directed towards the more receptive sections of public opinion. It is in the very young child of pre-school age that habits, whether of hygiene or diet, are formed and I feel that it is upon this section and its parents that any initial scheme of dental health education should concentrate. The individual dental officer can play his part by suggestions and advice at the chair side, but this can only include a comparatively small proportion of this community, as far too many young children are seen by a dentist for the first time only when suffering from toothache.

We are, as a nation, beginning to put a higher value, at least on our permanent dentition, so we must now therefore do all in our power to encourage the placing of a higher value on the temporary dentition. The heavy demand made in later childhood on the orthodontic services can be traced in so many cases to the early and premature loss of deciduous teeth.

M. G. BERRY, L.D.S., R.C.S.

DENTAL TREATMENT RETURN

A.—NUMBERS PROVIDED WITH DENTAL CARE:

				<i>Needing</i>	<i>Made</i>
				<i>Examined</i>	<i>Dentally</i>
				<i>Treatment</i>	<i>Fit</i>
				<i>Treated</i>	
Expectant and Nursing Mothers	...	...	81	73	47
Children under five	...	...	235	147	135

B.—FORMS OF DENTAL TREATMENT PROVIDED:

	<i>Scaling and Gum Treatment</i>	<i>Fillings</i>	<i>Silver Nitrate Treatment</i>	<i>Crowns or Inlays</i>	<i>Extractions</i>	<i>General Anaesthetics</i>	<i>Dentures Provided</i>		<i>Radio-graphs</i>
							<i>Full Upper or Lower</i>	<i>Partial Upper or Lower</i>	
Expectant and Nursing Mothers	21	60	1	—	42	19	8	14	2
Children under five	—	61	47	—	168	92	—	—	—

PRINCES PARK DAY NURSERY (60 Places)

The authorised establishment excluding domestic staff was:

Matron

Deputy Matron

Warden

Three trained Nursery Nurses

Four Nursery Assistants

The continuing need for this service was again demonstrated, although there was a slight reduction in attendances compared with the previous year spread fairly evenly throughout the year.

The total attendances were 12,410, an average attendance of 40.42 for the 307 days on which the nursery was open, compared with 12,893 attendances and a daily average of 41.99 during 1955.

The unit cost per approved place was £98 5s. 0d. and per child in attendance £140 9s. 0d. for the year ended 31st March, 1956.

Average daily attendance of children over the past four years:

	1956	1955	1954	1953
January ...	34.39	29.12	19.49	35.84
February ...	32.12	36.04	15.04	27.83
March ...	34.23	39.14	21.74	28.36
April ...	39.09	41.33	29.95	39.53
May ...	44.7	46.60	38.12	41.64
June ...	47.43	49.81	45.04	42.92
July ...	48.20	39.96	47.74	42.14
August ...	45.35	45.26	47.72	33.80
September ...	36.92	45.35	40.62	34.37
October ...	41.30	45.46	33.81	28.10
November ...	41.62	42.46	33.88	23.52
December ...	39.13	45.05	31.84	18.56

Attendances each month:

	Children aged			Total Attend- ances	No. of days open	Receipts
	0-1½	1½-3	3-5			
January ..	5.31	11.85	17.23	894	26	£161 4 4
February ..	5.32	10.36	16.44	803	25	£149 18 6
March ..	6.00	10.96	17.27	890	26	£196 6 0
April ..	6.92	10.88	21.29	938	24	£173 3 2
May ..	6.90	16.50	21.30	1161	26	£187 9 2
June ..	6.31	18.08	23.04	1233	26	£274 10 0
July ..	6.81	12.77	23.62	1253	26	£227 0 8
August ..	6.46	17.31	21.58	1179	26	£216 7 10
September ..	5.56	14.76	16.60	923	25	£228 0 2
October ..	5.85	13.04	22.41	1115	27	£189 5 6
November ..	4.73	12.77	24.12	1082	26	£197 14 8
December ..	4.00	13.88	21.25	939	24	£217 12 2
YEAR ..				12410	307	£2418 12 2

SECTION 23—MIDWIVES SERVICE

ESTABLISHMENT:

2 Domiciliary Midwives.

1 District Nurse Midwife (services shared between midwifery and home nursing).

The Superintendent of the Home Nursing Service is also the Non-Medical Supervisor of Midwives.

The domiciliary confinements showed a reduction in proportion to the total number of live births notified.

The following figures show the total number of live births to Eastbourne mothers and the number and proportion of domiciliary confinements in the last five years:

			<i>Total Births</i>	<i>Domiciliary Confinements</i>	<i>Percentage of Domiciliary Confinements</i>
1952	...	...	623	106	17·0
1953	...	...	632	102	16·1
1954	...	...	604	109	18·0
1955	...	...	543	107	19·7
1956	...	...	562	92	16·4

It is to be noted that the number of institutional confinements was again in excess of 80 per cent. of the total births.

The cost per case attended was £22 15s. 0d. as compared with £14 2s. 0d. for all County Boroughs.

Details of the work of the Domiciliary Midwives during the year are as follows:

BOOKINGS:

Number of cases on books on January 1st	...	40
New bookings	... ..	120
Number of cases on books on December 31st...		46

CONFINEMENTS:

(a) Doctor booked:

Doctor present	...	...	...	34
Doctor not present	...	...	...	30

(b) Doctor not booked:

Doctor present	...	...	...	—
Doctor not present	...	...	...	27
				—

(c) Miscarriages 4

ANALGESIA:

(a) Gas and Air:

Doctor present	8	
Doctor not present	11	
	—	19

(b) Trilene:

Doctor present	26	
Doctor not present	41	
	—	67

(c) Pethidine:

Doctor present	15	
Doctor not present	22	
	—	37

Medical aid was sought in 15 cases.

VISITS BY MIDWIVES:

Ante-natal visits	816	
Visits during labour	204	
Visits during puerperium	1,728	
Post-natal visits (domiciliary cases) ...	132	
Visits to 31 cases discharged from hospital before the 14th day	79	
	—	2,959

TRAINING OF PUPIL MIDWIVES:

Four pupil midwives from the East Sussex County Council were accepted for three months district training.

SECTION 24—HEALTH VISITING

ESTABLISHMENT:

- 1 Senior Health Visitor.
- 9 Health Visitor/School Nurses.

ALLOCATION:

National Health Service Act	7½
School Health Service	2½

There were several staff changes during the year. Two health visitors were appointed to fill vacancies occurring in September 1955 and January 1956. Mrs. S. M. James, formerly a whole-time Tuberculosis Visitor was appointed Senior Health Visitor in succession to Miss K. M. Avis who obtained an appointment under the World Health Organisation in India.

An additional car allowance provided greater mobility for the staff and at the end of the year one vacancy in the establishment remained unfilled.

HOME VISITING

The tendency towards more selective visiting is reflected in the summary of the work of the health visitors below. This shows decreases in visits to infants and younger children, but is offset by a very large increase in visits associated with family welfare and particularly in the care of the aged and handicapped. Old people on the hospital waiting list or following discharge from hospital are visited regularly in addition to routine visits to those living alone.

LIAISON WITH GENERAL PRACTITIONERS AND THE HOSPITALS

It is pleasing to record more progress in this matter. Health visitors are in regular attendance at the hospital paediatric clinic, a very important liaison and particularly so in the case of children thought to be neglected in their homes. A welcome innovation during the year is the practice of introducing health visitors to mothers in maternity units following confinement with whom they have had no previous contact. It is perhaps a consequence of this latter contact that the number of children attending and total attendances at Child Welfare Centres showed a welcome increase during the year.

HEALTH EDUCATION

This subject which is also referred to on page 46 is becoming an increasingly important function of the health visitors. The number of health education sessions attended by health visitors increased from 90 in 1955 to 215 in 1956.

Three health visitors attended courses in Mental Health during the year.

The Health Visitors' work is summarised in the following figures:

HOME VISITS

CARE OF MOTHERS AND YOUNG CHILDREN:

Children under 1 year	3,041
Children aged 1 and under 2 years	2,144
Children aged 2 but under 5 years	3,900
Expectant Mothers	297
In connection with Day Nursery	9

INFECTIOUS ILLNESS	134
---------------------------	-----

TUBERCULOSIS	951
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CARE AND AFTER CARE (including Aged and Handicapped Persons)	2,630
---	-------

OTHER VISITS:

To other Agencies (voluntary organisations, etc.)	224
To Day Nurseries	42
To Hospitals	363
Miscellaneous	535

CLINIC ATTENDANCES:

Child Welfare Centres	...	...	...	...	475
Immunisation and Vaccination Clinics	...	...	...	...	79
Health Education Sessions	...	...	...	...	215
Chest Clinic	...	...	...	...	90

SECTION 25—HOME NURSING

ESTABLISHMENT:

- 1 Superintendent (also non-medical Supervisor of Midwives).
- 1 Senior Home Nurse.
- 16 Home Nurses (including male nurses and S.E. Asst. Nurses).

STAFF

An additional full-time state registered nurse was appointed in September. At the end of the year in addition to the Superintendent and Senior Home Nurse fourteen full-time, one part-time state registered nurses and four part-time state enrolled assistant nurses were employed.

The overall picture of the work remained the same as in previous years. More than 45 per cent. of all cases nursed were persons aged 65 years and over. Nursing services were requested for few children and these were not of a serious nature. As is usual with a popular health and holiday resort a large number of requests for the services of home nurses are received from visitors to the town.

The free laundry service inaugurated last year for incontinent persons on the hospital waiting list for admission has worked very smoothly, thanks to the co-operation between the responsible officers of the Hospital Management Committee and this Department. The service proved of great benefit to patients, nurses and others working in the homes of patients.

The following are particulars of cases nursed:

	<i>New Cases</i>	<i>Total Cases</i>	<i>Visits</i>
Medical	796	886	16,809
Surgical	189	234	8,378
Infectious diseases	4	4	31
Tuberculosis	26	37	1,254
Maternal complications	5	5	76
Others—Chronic	317	541	25,405
	<hr/> 1,337	<hr/> 1,707	<hr/> 51,953

Patients were removed from the records on cessation of nursing attendance as follows:

Convalescent	561
To Hospital	225
Deaths	175
Other Causes	388
	<hr/>
	1,349
	<hr/>

The demand on the Home Nursing Service as compared with previous years is shown in the table below:

				<i>Cases</i>	<i>Visits</i>
1949	...	...	...	1,323	34,914
1950	...	...	...	1,667	47,898
1951	...	...	...	1,552	47,047
1952	...	...	...	1,967	47,470
1953	...	...	...	1,719	49,404
1954	...	...	...	1,671	49,533
1955	...	...	...	1,820	53,653
1956	...	...	...	1,707	51,953

SECTION 26—VACCINATION AND IMMUNISATION

GENERAL

The Authority's arrangements provide for the vaccination and re-vaccination against smallpox of infants, school children and adults, immunisation against diphtheria and whooping cough, and during the year the scope of this service was enlarged by the provision of vaccination against poliomyelitis for children born between 1947 and 1954.

Primary vaccination against smallpox of infants and pre-school age children is carried out by appointment at the Authority's four district child welfare centres and at the central clinic. Re-vaccinations are mainly performed at the central clinic as is poliomyelitis inoculation. Immunisation against diphtheria and whooping cough, in addition to being available at the central clinic and welfare centres is also carried out at special sessions in schools.

A.—VACCINATION AGAINST SMALLPOX

During the year 400 persons were vaccinated for the first time and 403 were re-vaccinated.

Of the 400 primary vaccinations 336 were of infants under one year of age which is equivalent to 59·7 per cent. of the registered live births in the area during 1956. This compares satisfactorily with the figure of 57·5 per cent. for 1955.

VACCINATION DURING 1956

	Primary Vaccination		Re-Vaccination	
	By Staff of Health Department	By General Practitioner	By Staff of Health Department	By General Practitioner
Under 1 year ..	134	202	—	—
1 to 2 years ..	7	16	—	1
2 to 5 years ..	3	9	3	8
5 to 15 years ..	2	11	69	50
15 years and over	1	15	22	250
	147	253	94	309
	400		403	
	803			

From this table it will be seen that three hundred and thirty-six infants under one year were vaccinated, one hundred and thirty-four by the Medical Staff of the Department and two hundred and two by General Medical Practitioners.

INFANT VACCINATION 1951-1956

<i>Year</i>	<i>Live Births</i>	<i>Number of Primary Vaccinations under 1 year of age</i>	<i>Percentage of Births during same period</i>
1956	563	336	59.7
1955	553	318	57.5
1954	612	347	56.7
1953	617	313	50.7
1952	635	275	43.3
1951	604	411	*68.0

*Epidemic in neighbouring authority.

B.—DIPHTHERIA IMMUNISATION

The total number of completed primary immunisation courses showed a reduction as compared with the previous two years. The decline is most apparent in the age groups over one year of age, and is perhaps attributable to pressure of publicity in favour of other forms of prophylaxis. Nevertheless, it is calculated that 62 per cent. of infants born in 1955 were immunised before the first birthday, easily a record high figure for the area.

Since the campaign started in 1939 the number of children known to have been immunised in the age groups 0-1 year and 1-2 years was:

<i>Year</i>	<i>Births</i>	<i>No. immunised in age groups 0-1 year and 1-2 years</i>	<i>Percentage of previous year's births immunised</i>
1956	563	417	75.4
1955	553	473	77.3
1954	612	481	77.9
1953	617	342	53.9
1952	635	394	64.2
1951	614	463	66.0
1950	701	467	63.1
1949	740	446	55.7
1948	801	606	61.7
1947	983	594	61.6
1946	964	453	67.9
1945	667	364	74.4
1944	489	241	57.8
1943	416	217	46.9
1942	463	209	54.4
1941	384	54	9.9
1940	545	14	—
1939	587		

In 1956 479 children were immunised, 259 by the Medical Staff of the Department and 220 by General Medical Practitioners.

The age groups and numbers were:

<i>Age Group</i>	<i>By Medical Staff of the Department</i>	<i>By General Medical Practitioners</i>	<i>Total</i>
0- 1	182	169	351
1- 2	29	37	66
2- 3	16	3	19
3- 4	9	1	10
4- 5	11	1	12
5-10	12	6	18
10-15	—	3	3
	<hr/> 259	<hr/> 220	<hr/> 479

REINFORCING DOSES: The age groups and numbers were:

<i>Age Group</i>	<i>By Medical Staff of the Department</i>	<i>By General Medical Practitioners</i>	<i>Total</i>
1- 5	94	34	128
5- 15	574	154	728
	<hr/> 668	<hr/> 188	<hr/> 856

The Department's immunisation records show that at the end of the year 1,813 children 0-5 years and 6,610 children aged 5-15 years had been immunised. The age groups and numbers were:

<i>Age Group</i>	<i>Number</i>	<i>Total</i>
0- 1	123	
1- 2	383	
2- 3	422	
3- 4	447	
4- 5	438	
	—	1,813
5- 6	506	
6- 7	561	
7- 8	589	
8- 9	660	
9-10	876	
	—	3,192
10-11	834	
11-12	610	
12-13	686	
13-14	651	
14-15	637	
	—	3,418
		8,423

These numbers represent 62·5 per cent. and 84·7 per cent. of the children in the age groups 0-5 years and 5-15 years of the Registrar General's estimated population of 2,900 and 7,800 in these respective age groups.

Individual immunity tends to wane with the passage of time. Taking into account inoculations performed within the last five years only, an index of the immunity to diphtheria in the population is shown in the following table:

<i>Age at 31/12/56; i.e. born in the year:</i>	<i>Under 1 1956</i>	<i>1-5 1955-52</i>	<i>5-10 1951-47</i>	<i>10-15 1946-42</i>	<i>Under 15 Total</i>
Last complete course of injections given during 1952-1956	123	1,690	2,160	1,590	5,563
Estimated mid-year child population	550	2,350	7,800		10,700
Immunity Index	22·36%	71·91%	48·08%		51·99%

Two thousand eight hundred and sixty children aged 5 to 15 years were inoculated prior to 1952 and the existence of residual protection in this group must be taken into account in interpreting the index.

There have been no notified cases of diphtheria in Eastbourne during the past seven years and no deaths since 1946.

Figures for deaths and notifications in Eastbourne and in England and Wales since 1945 are shown below:

DIPHTHERIA

<i>Year</i>	<i>Eastbourne</i>		<i>England and Wales</i>	
	<i>Notifications</i>	<i>Deaths</i>	<i>Notifications</i>	<i>Deaths</i>
1945	1	—	18,596	722
1946	1	1	11,986	472
1947	—	—	5,609	244
1948	1	—	3,575	156
1949	2	—	1,890	84
1950	—	—	962	49
1951	—	—	664	33
1952	—	—	376	32
1953	—	—	286	23
1954	—	—	173	9
1955	—	—	161	13
1956	—	—	63	*8

*Provisional.

C.—WHOOPING COUGH IMMUNISATION

The response to the offer of protection against whooping cough is associated with the use of combined immunising agents. There was therefore a reduction in the number of acceptances for this form of protection corresponding with that reported under the paragraph dealing with diphtheria immunisation above.

Figures of notification of cases of whooping cough in the past five years quoted below are of interest in attempting to assess the value of whooping cough immunisation, arrangements for which were approved by the Minister in September 1953.

<i>Year</i>	<i>Cases Notified</i>
1952	158
1953	133
1954	130
1955	37
1956	27

IMMUNISATION DURING 1956

<i>Age Groups</i>	<i>By Medical Staff of the Department</i>		<i>By General Practitioners</i>		<i>Totals</i>	
	<i>Primary</i>	<i>Re-Inforcing</i>	<i>Primary</i>	<i>Re-Inforcing</i>	<i>Primary</i>	<i>Re-Inforcing</i>
0-1 ..	170	—	159	—	329	—
1-2 ..	24	—	32	—	56	—
2-3 ..	15	—	2	3	17	3
3-4 ..	7	—	1	—	8	—
4-5 ..	10	1	1	16	11	17
Aged 5 and over ..	7	3	5	37	12	40
TOTALS	233	4	200	56	433	60

D.—VACCINATION AGAINST POLIOMYELITIS

At the commencement of the year the Minister of Health issued his proposals for the use of a vaccine against poliomyelitis as part of the National Health Service.

The Council approved the proposed arrangements and parents were invited to submit written consent forms for the vaccination of their children within the selected age groups.

The number of children who were registered by the 14th April and notified to the Ministry were:

<i>Year of Birth</i>	<i>Boys</i>	<i>Girls</i>
1947	191	150
1948	159	138
1949	136	151
1950	130	105
1951	75	59
1952	46	57
1953	33	51
1954	37	29
	807	740
	Total 1,547	

The amount of vaccine received enabled 152 children to be vaccinated in the special age groups selected by the Ministry.

SECTION 27—AMBULANCE SERVICE

The Eastbourne Division of the St. John Ambulance Brigade continued to undertake the Ambulance Service for the Authority with distinction.

The full-time paid staff of the Brigade consist of:

Superintendent.
Transport Officer.
8 Trained driver/attendants.

Thanks are again due to the volunteers who regularly assisted in the conduct of the service at night and who provided valuable help in escort duties.

There was little variation from previous years in the volume of work undertaken. It is noteworthy that the use of dual purpose vehicles contributes to the economic running of the service by the reduction in journeys required in relation to patients carried.

The Superintendent, Mr. A. J. Burnage, maintained the closest liaison with the Medical Officer of Health and is to be congratulated on the standard of efficiency maintained.

The following is a summary of the work undertaken on behalf of the Local Health Authority during the past year:

MONTHLY STATISTICS

1956	AMBULANCES			SITTING CAR CASES		
	<i>Journeys</i>	<i>Patients</i>	<i>Mileages</i>	<i>Journeys</i>	<i>Patients</i>	<i>Mileages</i>
January ..	243	329	2,084	386	946	3,755
February ..	197	293	1,807	374	937	3,785
March ..	238	344	1,815	361	888	3,038
April ..	232	323	1,569	382	817	4,589
May ..	300	380	2,077	392	962	3,879
June ..	251	343	2,754	330	994	3,074
July ..	271	371	2,562	354	1,079	4,915
August ..	284	392	1,890	410	1,015	3,933
September	252	318	1,906	304	837	3,809
October ..	285	330	2,302	348	983	4,858
November..	226	331	1,567	348	916	4,147
December	213	298	1,759	309	749	3,496
TOTALS..	2,992	4,052	24,092	4,298	11,123	47,278

JOURNEYS AND MILEAGES SINCE 5TH JULY, 1948

	Ambulances		Sitting Case Cars	
	<i>Journeys</i>	<i>Mileage</i>	<i>Journeys</i>	<i>Mileage</i>
1948 (5th July to 31st Dec.)	1,427	23,127	757	30,415
1949	2,808	48,358	3,452	56,882
1950	2,962	34,013	3,660	55,023
1951	2,668	27,466	4,608	54,838
1952	2,601	29,505	3,724	48,353
1953	2,719	29,220	3,721	46,801
1954*†	2,984	28,480	4,108	45,760
1955†	3,205	27,739	4,551	48,987
1956†	2,992	24,092	4,298	11,123

* excluding Princes Park Day Nursery.

† excluding Occupation Centre.

ORIGIN OF CALLS

ORIGIN OF CALLS		AMBULANCES					SITTING CASE CARS						
		1951	1952	1953	1954	1955	1956	1951	1952	1953	1954	1955	1956
Emergency calls to street accidents .. ..	..	377	451	492	472	594	590	45	49	41	41	51	45
Local Hospitals .. ..	..	1,607	1,844	1,913	2,210	1,898	1,888	1,141	1,241	1,157	1,280	1,224	1,033
Local Convalescent Homes ..	..	29	23	35	27	28	43	183	168	209	216	216	200
General Medical Practitioners	..	587	565	589	643	663	683	283	342	327	348	353	427
Maternity Home .. ..	..	26	15	29	18	18	20	28	25	25	12	9	12
Nursing Homes .. ..	..	53	27	31	57	39	36	3	4	6	4	5	5
Ministry of Pensions .. ..	..	4	8	21	24	15	7	55	75	114	98	119	106
Other Ambulance Authorities	..	54	66	79	61	72	48	261	218	278	342	332	433
Authorised Mental Health Officers .. ..	..	25	51	58	47	53	61	79	74	109	92	118	104
Others .. ..	..	156	150	180	362	275	218	127	258	256	141	79	131
Out-Patients:	..	..	..	..	..	..	..	..	..	..	..	..	..
Chest Clinic .. ..	..	144	242	234	180	128	108	364	525	663	723	644	397
Foot Clinic .. ..	..	—	8	—	—	—	—	424	366	236	274	237	247
Local Hospitals .. ..	..	24	—	—	88	193	339	4,943	5,988	6,357	7,204	7,535	7,317
Royal Sussex County Hospital, Brighton .. ..	..	7	20	29	20	27	11	550	211	551	591	987	666
Infectious Diseases .. ..	..	3,093	3,470	3,627	4,209	4,003	..	..	..	..	..	..	..
	..		115	98	34	30	..	..	..	..	..	..	..
	..	3,093	3,585	3,725	4,243	4,033	4,052	8,486	9,544	10,329	11,366	11,909	11,123
Journeys .. ..	..	2,668	2,601	2,719	2,984	3,205	2,992	4,608	3,724	3,721	4,108	4,551	4,298
Mileage .. ..	..	27,466	29,505	29,220	28,480	27,739	24,092	54,838	48,353	46,801	45,760	48,987	47,278

At a seaside health resort in which a convalescent home (191 beds) is situated, the service is called upon to convey a large number of patients to and from the local railway station. In the year under review the following are particulars of patients and mileages of cases sent by rail:

<i>Conveyance used to Station</i>	<i>Patients</i>	<i>Train Mileage</i>
Ambulance	96	8,081
Sitting case car	333	25,153

Fares in respect of the above patients were paid by the Local Authority in respect of the following only:

<i>Conveyance used to Station</i>	<i>Patients</i>	<i>Train Mileage</i>
Ambulance	46	3,705
Sitting case car	16	1,305

In addition to the above services the St. John Ambulance Brigade undertook the conveyance of pupils to and from the Occupation Centre.

OCCUPATION CENTRE

1956	<i>Sitting Case Cars</i>		
	<i>Journeys</i>	<i>Patients</i>	<i>Mileage</i>
January	68	398	617
February	71	383	635
March	80	430	689
April	44	264	370
May	78	496	722
June	84	532	741
July	56	362	526
August	—	—	—
September	52	327	481
October	92	584	861
November	80	455	722
December	59	412	606
TOTALS	765	4,643	6,970

The vehicles in use by the St. John Ambulance Brigade at the end of the year were:

AMBULANCES:

<i>Make</i>	<i>Registration No.</i>	<i>Date of first Registration</i>	<i>Year brought into Ambulance Service</i>
Austin	BJK.141	30.9.1953	1953
Bedford	HC.8844	9.10.1948	1948
Vauxhall	BPM.840	21.12.1939	1952
Vauxhall	CNM.321	31.10.1938	1939
Vauxhall	JK.7051	24.8.1937	1937

DUAL PURPOSE VEHICLES:

Bedford	BHC.240	8.10.1952	1952
Morris	CJK.700	11.7.1955	1955
Morris	DJK.327	1.9.1956	1956

SITTING CASE CARS:

Wolsely	GRU.880	5.7.1947	1955
Austin	LPD.826	25.4.1947	1954

SECTION 28—PREVENTION OF ILLNESS, CARE AND AFTER CARE

A.—TUBERCULOSIS

Forty-nine cases of respiratory and one of non-respiratory tuberculosis were reported. Of these, fourteen respiratory cases had not previously been notified in any other district. This is the lowest figure of new notifications of tuberculosis ever recorded.

The arrangement for care and after-care of tuberculous patients remained as described in my 1955 Report.

NOTIFICATION REGISTER

	Respiratory		Non-Respiratory		Total	
	Males	Females	Males	Females	Males	Females
ON REGISTER:						
1st January, 1956	189	130	15	19	204	149
Add:						
Notifications ..	6	8	—	—	6	8
Transfers ..	15	20	—	1	15	21
Posthumous Noti- fications ..	1	—	—	—	1	—
Found on Death Returns ..	1	2	—	1	1	3
	212	160	15	21	227	181
Less:						
Deaths ..	5	4	—	1	5	5
Left Town ..	6	5	—	—	6	5
Arrested ..	7	7	—	1	7	8
	18	16	—	2	18	18
ON REGISTER:						
31st December, 1956	194	144	15	19	209	163

Age grouping of new cases notified and transfers to the area:

Age Groups	Respiratory		Non-Respiratory		Total	
	Males	Females	Males	Females	Males	Females
0- 5	—	—	—	—	—	—
5-10	—	—	—	—	—	—
10-15	—	—	—	—	—	—
15-25	2	6	—	1	2	7
25-45	10	16	—	—	10	16
45-65	6	7	—	—	6	7
Over 65 ..	1	1	—	—	1	1
	19	30	—	1	19	31

DEATHS:

The Registrar General's return of causes of death indicates that 6 persons died from tuberculosis of the lungs and 2 persons died from non-respiratory tuberculosis in the following age groups:

			<i>Respiratory</i>		<i>Non-Respiratory</i>	
			<i>Males</i>	<i>Females</i>	<i>Males</i>	<i>Females</i>
25-45	..	..	2	1	—	—
45-65	..	..	—	—	1	—
Over 65	..	..	1	2	—	1

The death rates per 1,000 population were:

Respiratory	..	..	..	..	..	..	0·103
Non-Respiratory	..	..	..	..	..	..	0·034
All Forms	..	..	..	..	..	..	0·14

SUMMARY OF THE WORK OF THE TUBERCULOSIS VISITOR

Visits paid to tuberculous households	..	..	951
Chest Clinic attendances	..	..	90
Visits to hospitals	..	..	36

Extra Nourishment granted to persons suffering from Tuberculosis:

(a) *Liquid Milk:*

Quantity supplied at two pints per day	1,460 pints
Quantity supplied at one pint per day ..	19,811 pints
Total	21,271 pints

	<i>Males</i>	<i>Females</i>	<i>Total</i>
Cases assisted	57	30	87

B.C.G. VACCINATION

The Council's arrangements in force since 1949 for the offer of B.C.G. Vaccination to such persons whom it is judged to be medically expedient in view of their known contact with tuberculosis were modified during the year to include any other classes of persons as may be approved from time to time by the Minister of Health.

In accordance with this amendment the Minister approved the Council's arrangements for offering B.C.G. vaccination to school children between their thirteenth and fourteenth birthdays, with effect from the 17th August, 1956.

The additional work was carried out as part of the School Health Service and details of the working of the scheme are included in that section of the report on page 122.

A. *Contact Scheme (carried out by the Chest Physician)*

AGE GROUPS:

Under 1 year	..	..	..	..	..	13
1 to 2 years	..	..	..	..	..	2
2 to 5 years	..	..	..	..	..	8
5 to 10 years	..	..	..	..	..	10
10 to 15 years	..	..	..	..	..	1
Over 15 years	..	..	..	..	..	4

B. *School Children Scheme (carried out by the medical and nursing staff of the department)*

(i) Number skin tested	..	..	..	..	417
(ii) Number found negative	..	..	..	..	361
(iii) Number vaccinated	..	..	..	..	361

CHEST PHYSICIAN'S REPORT, 1956

During 1956 14 new cases of pulmonary tuberculosis were notified in Eastbourne. This is considerably fewer than in 1955, when there were 42 new cases. There were 6 deaths during the year, as opposed to 7 in 1955.

The south coast continues to attract a steady stream of semi-invalids from the more inclement midlands and northern part of the country and as far as tuberculosis is concerned 35 fresh cases of pulmonary disease came to live in Eastbourne during the year, whereas 26 cases came to the town in 1955. These "inward transfers" are invariably from the older age groups of the population and usually require more care and attention than the younger patients.

In view of the lower number of new cases diagnosed during the year, there were naturally fewer new contacts examined, the actual number being 63, which is very nearly 5 contacts examined for every new patient. The total number of contacts examined was also less than in 1955 for the same reason. None of the contacts under observation developed tuberculosis during 1956.

Thirty-eight of the 63 new contacts were found to be tuberculin negative and were accordingly offered vaccination with B.C.G. and none refused.

A figure which has not been quoted in previous years has been the number of cases regarded as recovered and accordingly removed from the Register. During 1956 there were 14 such cases. There were no occasions necessitating carrying out any special survey during 1956 and there were no posthumous notifications requiring investigation of the contacts.

Altogether it has been a most satisfactory year so far as tuberculosis is concerned, but there can be no grounds for complacency as there are already signs that 1957 will not produce quite such satisfactory results. An effort is made to keep a check on the employment conditions of all notified cases, but owing to the strictly confidential relationship which has to exist between the Chest Clinic staff and the patients attending, this is a difficult task requiring great tact, and it cannot be said that the conditions of employment of every patient have been investigated.

During the year the School B.C.G. Scheme started in November and we are hoping in future to be able to investigate the contacts of all school children found to be tuberculin positive.

We still await the day on which every family in which there is a case of tuberculosis will be satisfactorily housed.

Mrs. James has again been a tower of strength in dealing with the welfare of our patients and their families, and the co-operation received from the Public Health Department has been very much appreciated by the Chest Clinic staff.

A. H. FERGUSON GOW,
Chest Physician.

B.—ILLNESS GENERALLY

The Health Visiting, Home Nursing, Domestic Help and, indeed, all the services provided by the Department are available for all cases referred to them including those discharged from hospitals. In cases where other official bodies or voluntary organisations are able to help, the persons concerned are advised accordingly.

C.—RECUPERATIVE HOLIDAYS

The Authority's arrangements include the provision of convalescence and rehabilitation for persons recovering from illness and to other invalids in cases not otherwise provided for. In accordance with the recommendations of their medical practitioners and following investigation by this department a period of convalescence was approved by the Health Committee for three adults.

D.—LOAN OF EQUIPMENT

The operation of this service is closely associated with the Home Nursing Service, the majority of articles being loaned to patients attended by home nurses.

A wide variety of sick room and other equipment is available on the recommendation of medical practitioners at charges in accordance with the patient's means.

A total of 604 articles were loaned to 382 patients. The demands on this service are shown by the following figures:

<i>Year</i>	<i>Number of Loans</i>	<i>Number of Patients</i>	<i>No. of cases in which no charge was made</i>
1956	604	382	124
1955	750	395	95
1954	677	370	103
1953	768	435	110
1952	672	363	69
1951	709	328	71
1950	550	337	68
1949	42	27	3

E.—VOLUNTARY ORGANISATIONS

I wish to record grateful acknowledgement for the facilities and services offered by voluntary organisations including the Order of St. John, the British Red Cross Society, the Guardianship Society, the Women's Voluntary Services, the Eastbourne Voluntary Association for the Care of Cripples, the National Society for the Prevention of Cruelty to Children and other local and national organisations of which full advantage was taken in appropriate cases.

F.—HEALTH EDUCATION

A considerable part of the time of the staff of the department is now spent in propagating ways to achieve healthy living. The aim of health education is to help people to appreciate the need for improvement in physical environment and mental outlook. It sets out to explain the benefits which can accrue from recommended changes in a mode of life, and to help in the formation of habits of living which will ultimately give a fuller life.

Official and national voluntary organisations and many commercial concerns are producing vast quantities of material with the object of focusing public attention on to means of minimising sickness and accidents and promoting mental health in the community. The department has utilised much of this material in the shape of films and filmstrips, posters, pamphlets and visual aids, and has also improvised successfully to meet particular needs.

The medical staff and health visitors have given freely of their time to address interested bodies from whom enquiries are always welcomed.

In addition to this specialised teaching the most unspectacular, but perhaps the most productive work is performed in the patient daily repetition of advice and example by the field workers of the department and general medical practitioners, in the homes of the people, in the surgeries and in the Authority's clinics and welfare centres.

G.—SITTER-UP SERVICE

The services of ten “sitters-up” were used on one hundred nights in twenty-seven cases of sickness at home requiring attention at night, at a cost of £100 to the Local Health Authority. Sitter-up services were also arranged by the Department on ninety-five nights and ten days without cost to the Authority.

H.—LAST OFFICES

Payments for the services of persons in connection with last offices was made on one occasion.

SECTION 29—DOMESTIC HELP

The demand for this form of assistance continues to increase. The amount of help which can be supplied in individual cases is necessarily restricted by reason of the continued difficulty in recruiting suitable helpers for this important work. The service operates in very difficult circumstances and in times of sickness and holidays is strained to the utmost.

During the year 358 cases were granted the services of domestic helps. Charges according to the Authority’s scale were reimbursed by the National Assistance Board in 187 cases.

<i>According to Scale</i>					<i>New Cases</i>	<i>Old Cases</i>
Full cost	..	..	..	..	56	20
Part cost	..	..	..	..	—	—
Free	..	..	..	..	6	—
<i>Special Cases</i>						
Part cost	..	..	..	..	27	28
Free ¹	..	..	..	..	28	27
<i>National Assistance Board Cases</i>					56	131
					—	—
					173	206
					—	—
Total					379	
					—	

In this analysis 21 cases are included twice owing to changes in circumstances.

SECTION 51—MENTAL HEALTH SERVICE

ADMINISTRATION

The Health Services Committee continued to be responsible to the Council for functions under this Act. The staff remained unchanged from my previous report except that the R.M.P.A. Nurse has been released from part time duly authorised officer duties, as she is on full time work at the Occupation Centre. Her part time duties have been taken over by one of the Health Visitors.

LUNACY AND MENTAL TREATMENT CASES

It is regretted that the reduction in admission referred to in my last report has not been maintained as there has, in fact, been an overall increase of 17 in the year. It is, however, encouraging to note that there has been a further drop of 15 certified admissions during the year. Increased use was made of Urgency Orders. Of the 21 admissions (an increase over the previous year of 19) only one case was certified.

CARE AND AFTER CARE

During the year Mental Health Officers made 349 visits and 504 interviews were given at Avenue House. In addition, 223 visits were made in connection with Mental Deficiency.

LUNACY AND MENTAL TREATMENT ACTS

Figures for the past five years are as follows:

Year	Population	Patients admitted to Mental Hospitals		
		Voluntary	Certified	Others
1952	57,200	137	51	3
1953	57,190	178	57	---
1954	57,600	188	46	2
1955	57,830	168	46	3
1956	57,850	179	31	24

The number remaining at 31st December, 1956 was 253, 4 less than at 31st December, 1955. Of these 112 were Voluntary Patients.

ST. MARY'S HOSPITAL

During 1956, 10 men and 38 women were admitted under Section 20. Two men and 1 woman were admitted not under Order.

Of the 10 men, 2 were certified, 1 was admitted as a Voluntary Patient, 1 went to Hellingly on an Urgency Order and 6 were dealt with in other manners by relatives, etc.

Of the 38 women, 8 were certified, 6 admitted as Voluntary Patients, 5 on Urgency Orders, 1 on a Temporary Certificate and 18 were dealt with in other manners.

HELLINGLY HOSPITAL

- (a) *Certified Cases*: Thirty-one persons (3 male and 28 female) were certified. Of that total 10 were admitted from their own homes, 20 from St. Mary's Hospital and 1 re-classified from Urgency Order (already in Hellingly).
- (b) *Urgency Orders*: Four men were admitted under this Section, all subsequently became Voluntary Patients. Seventeen women were admitted—16 became Voluntary Patients and 1 was certified.
- (c) *Temporary Patients*: Three females were admitted—2 died and 1 was still in at the end of the year.
- (d) *Voluntary Patients*: The admission of 65 persons (19 men and 46 women) was arranged by the officers. Of these 41 were admitted from St. Mary's Hospital and 24 from their homes.

The position at the end of the year was as follows:

	<i>St. Francis Hospital</i>		<i>Hellingly Hospital</i>		<i>Others</i>		<i>Total</i>
	<i>M.</i>	<i>F.</i>	<i>M.</i>	<i>F.</i>	<i>M.</i>	<i>F.</i>	
December 31st, 1955 ..	27	58	55	106	2	9	257
Admitted during year ..	3	8	61	138	—	1	211
Discharged during year ..	2	14	55	114	—	—	185
Died during year ..	2	2	8	18	—	—	30
December 31st, 1956 ..	26	50	53	112	2	10	253

MENTAL DEFICIENCY ACTS, 1913-1938

MALES

Six males were added to the Register, 5 on notification of the Local Education Authority under Section 57 (3) and (5) Education Act, 1944 and 1 transferred from Dorset County Council.

One male was removed from the Register being deemed not a Mental Defective on re-examination. He had been under Statutory Supervision.

FEMALES

Two females were added to the Register, both under Section 57 (3) and (5) of the Education Act. Seven females were removed from the Register—2 supervision cases died and 5 institution cases were discharged. Three males and 2 females were awaiting Institutional care.

One hundred and ninety visits were made to Supervision cases. The position on 31st December, 1956, was:

	<i>Males</i>	<i>Females</i>	<i>Total</i>
In Institutions	42	30	72
On Licence from Institutions ..	—	5	5
Under Guardianship	4	5	9
Under Supervision	33	41	74
	<hr/> 79	<hr/> 81	<hr/> 160

The Institution cases were placed as follows:

	<i>Male</i>	<i>Female</i>
Laughton Lodge	3	1
Brentry Colony	7	—
Stoke Park	6	5
Barvin Park	1	—
Princess Christian Farm Colony	2	—
Rampton	1	—
St. Teresa's	—	9
Hortham Colony	—	1
Etloe House	—	2
Darenth Park	7	5
St. Lawrences	1	—
Pouchlands	2	—
Hill House	—	4
St. Helen's	3	2
Leybourne Grange	6	6
Starcross	2	—
Manor Hospital, Epsom	1	—
	<hr/> 42	<hr/> 35

OCCUPATION CENTRE

The Centre continued on a full-time basis staffed by a Supervisor and two Assistant Supervisors. The number of subnormal children on the register varied from 17 in January to 20 in December. These made a total of 2,955 attendances representing an average daily attendance of 15. With the admission of children under 5 years of age commencing in April, the ages of "children" in attendance at the Centre ranged from 3 years to 44 years. This wide disparity in ages has necessitated four groups of pupils to be trained.

Average Daily Attendances during the period 1st January, 1956, to
31st December, 1956

	EASTBOURNE				EAST SUSSEX				TOTAL ALL PUPILS
	Average Daily Attendance				Average Daily Attendance				
MONTH	Under 5 years	5-15 years	Over 15 years	Total	Under 5 years	5-15 years	Over 15 years	Total	Average daily Attendance
January	—	5·65	5·29	10·94	—	2·65	1·00	3·65	14·59
February	—	4·83	5·72	10·55	—	1·22	1·00	2·22	12·77
March	—	5·00	5·75	10·75	—	1·75	1·00	2·75	13·50
April	1·00	5·73	5·27	12·00	—	2·73	1·00	3·73	15·73
May	1·00	5·75	5·60	12·35	—	1·90	1·00	2·90	15·25
June	1·00	4·62	6·52	12·14	—	2·76	1·00	3·76	15·90
July	1·00	4·47	6·60	12·01	—	2·93	1·00	3·93	15·94
August	—	—	—	HOLIDAYS	—	—	—	—	—
September	1·00	4·92	6·77	12·69	—	2·62	0·92	3·54	16·23
October	1·78	4·70	6·22	12·70	—	2·74	0·96	3·70	16·40
November	0·30	4·95	6·20	11·45	—	2·70	0·95	3·65	15·10
December	1·73	5·53	6·60	13·86	—	2·87	0·93	3·80	17·66
DAILY AVERAGE FOR PERIOD	0·79	5·07	6·05	11·91	—	2·41	0·98	3·39	15·30

SECTION C

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES

Notification of Infectious Disease

Food Poisoning

Public Health Laboratory Service

Venereal Diseases

INFECTIOUS DISEASE

The cases of infectious disease reported to the Department and notified to the Registrar General totalled 675. An epidemic of measles which began in 1955 continued for the first six months of the year and accounted for 508 of the notifications received.

The reported incidence of scarlet fever and whooping cough remained low. Thirty-eight notifications of puerperal pyrexia were received, of which number thirty-one were due to non-puerperal causes. There were two cases of meningococcal infection, one of which in a female aged 21 years proved fatal. Two confirmed cases of acute poliomyelitis (paralytic) occurred in children but both recovered. One boy suffered a degree of paralysis but is making a good recovery.

Food Poisoning. Three minor outbreaks of food poisoning involved a total of twenty-two persons. There were also three isolated cases.

The largest outbreak occurred at a private school where fifteen pupils were affected. In this and in two isolated cases the cause of the illness was not discovered.

The infecting organisms in other cases were identified as salmonella typhi-murium and staphylococcus pyogenes. In the latter case, in which three persons were ill, the vehicle of infection was discovered to be minced ham and egg sandwich filling prepared some thirty hours before consumption and insufficiently refrigerated.

Dysentery. The incidence of this infection is increasing in the country as a whole. A number of the notified cases occurred in accommodation provided by the Authority for the temporarily homeless. The organism responsible, shigella sonnei, is notoriously difficult to eradicate, but some success was achieved by a strict attention to hygiene and the systematic disinfection of lavatory seats. It was necessary to suspend one man from his employment as a food handler under the Public Health (Infectious Diseases) Regulations 1953.

NOTIFICATIONS OF INFECTIOUS DISEASES (CORRECTED)

Notifiable Disease	At all Ages	Age Incidence				
		0-5	5-15	15-45	45-65	65 & over
Scarlet Fever	24	6	17	1	—	—
Whooping Cough	26	13	13	—	—	—
Acute Poliomyelitis (paralytic)	2	1	1	—	—	—
Measles	508	225	267	16	—	—
Dysentery	23	9	4	10	—	—
Meningococcal Infection ..	2	1	—	1	—	—
Acute Pneumonia	8	—	—	1	2	5
Erysipelas	4	—	—	—	3	1
Food Poisoning	25	5	13	4	3	—
Puerperal Pyrexia	38	—	—	38	—	—
Tuberculosis (respiratory) ..	14	—	—	8	5	1

HEALTH LABORATORY SERVICE

Numerous pathology investigations were carried out on behalf of the Department at the Public Health Laboratory, Brighton, under the direction of Dr. J. E. Jameson, and by Dr. D. C. Taylor and Dr. F. R. Philps, pathologists to the Eastbourne Hospital Management Committee, to whom grateful acknowledgement is given for their ready assistance and co-operation at all times.

VENEREAL DISEASES

Information was supplied to the Department by the Eastbourne Hospital Management Committee which is responsible for the treatment of venereal diseases. Two weekly sessions were held at the treatment centre at the Princess Alice Memorial Hospital, Mondays for women and children, and Wednesdays for men.

Cases attending the Centre are shown in the table below. The figures in brackets relate to 1955.

<i>Condition</i>	<i>Males</i>		<i>Females</i>		<i>Total</i>		<i>Total all Cases</i>
	<i>Old Cases</i>	<i>New Cases</i>	<i>Old Cases</i>	<i>New Cases</i>	<i>Old Cases</i>	<i>New Cases</i>	
Syphilis	4 (6)	1 (2)	3 (6)	— (1)	7 (12)	1 (3)	8 (15)
Gonorrhoea	— (2)	— (1)	— (—)	— (—)	— (2)	— (1)	— (3)
Other Conditions ..	— (24)	16 (21)	— (20)	13 (7)	— (44)	29 (28)	29 (72)
TOTALS	4 (32)	17 (24)	3 (26)	13 (8)	7 (58)	30 (32)	37 (90)

SUMMARY, 1942-1956

<i>Year</i>	(1)	(2)	(3) <i>Attendances</i>		
	<i>Total Cases</i>	<i>Non V.D. Cases included in (1)</i>	(a) <i>For M.O.s attention</i>	(b) <i>Intermediate Times</i>	(c) <i>Total</i>
1942	118	42	399	168	567
1943	216	90	694	231	925
1944	271	123	766	181	947
1945	286	151	646	118	764
1946	277	148	756	318	1074
1947	204	112	628	147	775
1948	160	96	461	12	473
1949	155	80	454	58	512
1950	160	68	348	68	416
1951	98	62	286	20	306
1952	86	62	223	16	239
1953	84	66	141	5	146
1954	78	63	88	—	88
1955	90	72	79	—	79
1956	36	28	57	—	57

SECTION D—

MISCELLANEOUS

Nursing Homes

Nurses Agencies

Nurseries and Child Minders

Children's Act, 1948

National Society for the Prevention of Cruelty to Children

Staff Medical Examinations

Midwives Act, 1951

Epilepsy and Cerebral Palsy

PUBLIC HEALTH ACT, 1936—SECTION 187

NURSING HOMES

No changes in registration particulars were reported and at the end of the year twelve Nursing Homes provided an approximate total of 140 beds for chronic, medical, and surgical patients, and 4 beds for maternity cases.

Visits of inspection were carried out by the medical staff of the Department.

NURSES ACTS, 1943 and 1945

NURSES AGENCIES

Licences in respect of the two existing Agencies were renewed. The records of Agencies were found to be satisfactory on inspection by the medical staff of the Department.

NURSERIES AND CHILD MINDERS' REGULATION ACT, 1948

Two premises other than private dwellings where children are received to be looked after for the day, or a substantial part of the day, or for any longer period not exceeding six days, remained registered under this Act.

Five persons remained registered as Child Minders at the end of the year. Orders made by the Council under Section 2 of the Act, restrict the number of children to be looked after to a combined total of 23 for all five homes.

CHILDREN'S ACT, 1948

RESIDENTIAL HOMES AND NURSERY

The Medical Officer of Health remained on the list of general practitioners of the Local Executive Council and, in that capacity, was responsible for the medical care of all children in the Council's Residential Homes and Nursery. In addition to medical examination by the staff of the Department prior to admission, all children in the Homes were medically inspected once a quarter and children in the Nursery were inspected monthly.

Dental inspection of the children was carried out in the Homes by the Chief Dental Officer and any necessary treatment was provided without delay through the School Dental Service or, in the case of pre-school children, through the Council's arrangements for dental treatment under the National Health Service Act.

In the light of repeated outbreaks of infection in the Thornwick residential nursery a recommendation made to the Council in co-operation with Mr. T. Hill, the Children's Officer, was implemented on 1/4/56 by the transfer of the Nursery to a larger local authority whose particular problems in Child Care still necessitated the retention of residential nurseries. It is of interest to note that the nursery has seldom been free from infection of one kind or another since the transfer. Medical officers of this department have continued to co-operate in the investigation and control of such illness.

REPORT BY THE LOCAL INSPECTOR OF THE NATIONAL SOCIETY FOR THE PREVENTION OF CRUELTY TO CHILDREN

I am indebted to Inspector B. H. Rich for the following details of the work the Society undertook during the year.

1. Cases referred by the staff of the Public Health Department.

<i>Classification</i>	<i>Cases</i>		<i>Children</i>				<i>Total</i>
		<i>0-2</i>	<i>2-5</i>	<i>5-15</i>	<i>15-17</i>		
Neglect	7	12	8	3	—		23
Ill Treatment ..	1	—	—	2	—		2
Beyond Control ..	1	1	1	3	—		5
Totals ..	9	13	9	8	—		30

2. Other cases reported by the general public and other official bodies were classified as:

Neglect	45
Ill Treatment and Assault	8
Beyond Control	3
Moral Danger	3
Unregistered Foster Child	1
Advice Sought	29
Total ..	89

These cases involved 230 children, of whom 139 were school children.

The number of visits made in connection with cases reported by Public Health Officers was 72.

STAFF MEDICAL EXAMINATIONS

The medical staff again devoted a considerable amount of time to medical examinations in connection with new entrants, superannuation, and of staff of various departments concerning absence from duty on account of accident or illness.

In 1956 the examinations were:

Superannuation	..	..	..	..	76
New Appointments	..	..	..	..	89
Accident	..	..	..	..	3
Sick Pay	..	..	..	..	66
Others (part-time workers)	..	..	..	..	51
					<hr/>
					285
					<hr/>

The extent of these examinations is shown by the following:

	<i>Total</i>
<i>Examinations</i>	
Year (1st January to 31st December)	
1949 (Part year—1st April to 31st December)	178
1950	252
1951	257
1952	204
1953	188
1954	303
1955	309
1956	285

In addition to the above 28 examinations were carried out on candidates for admission to Training Colleges, etc.

There were also 11 sessions at Chelsea Training College and 3 at Eastbourne Training College for medical inspection.

MIDWIVES ACT, 1951

The Local Health Authority is the Local Supervising Authority for the purposes of the Midwives Act, 1951.

During the year thirty-two midwives notified their intention to practise of whom three were in the Local Health Authority's Domiciliary Midwifery Service, and twenty-nine were employed in the Hospital Service. Four independent midwives notified their intention to act as maternity nurses.

EPILEPSY AND CEREBRAL PALSY

At the end of the year there were twenty-nine ascertained epileptics on the Department's records and fourteen persons with cerebral palsy. One person suffered from both afflictions. During the year six persons, including two children, were ascertained as epileptics. One case of cerebral palsy was reported. Of cases removed from the records, three children left school, two others left the town, one became classified as in Institutional care on becoming 16 years old and one was taken off the register as recovered.

NUMBER OF PERSONS ASCERTAINED

	<i>Local Education Authority</i>	<i>Mental Health Service</i>	<i>Voluntary Association for the Care of Cripples</i>	<i>In Institutional Care</i>
On records 31.12.1955				
Epileptic ..	21	9	—	2
Cerebral Palsy ..	3	7	4	—
Removed during 1956				
Epileptic ..	7	1 (died)	—	1
Cerebral Palsy ..	—	1	—	—
Ascertained during 1956				
Epileptic ..	2	2	—	2
Cerebral Palsy	—	1	—	—
On records at 31.12.56				
Epileptic ..	16	10	—	3
Cerebral Palsy	3	7	4	—

SECTION E

SANITARY CIRCUMSTANCES OF THE AREA

Water Supply

Public Baths

WATER SUPPLY

The water supply for the Borough was derived from the sources described in the 1952 Report. It was not necessary during 1956 to make use of the supply from the Waterworks Road Pumping Station. The water from these sources met all demands, and bacteriologically as well as chemically maintained its usual high standard of quality.

The closest co-operation to safeguard the purity of the water supply was maintained between the Eastbourne Waterworks Company and the Public Health Department. The results of 9 chemical and 112 bacteriological examinations of both raw and piped supplies carried out on behalf of the Company and of the Department were uniformly satisfactory.

PUBLIC BATHS

Provision remained as described in my 1955 report.

The gross expenditure and income for the year ended 31st March, 1956 was:

		<i>Gross expenditure</i>	<i>Income</i>
Seaside Baths	.. ..	£2,633	£848
Old Town Baths	.. ..	£3,277	£2,030

The Old Town Swimming Bath was open from 16th April to 27th October.

The numbers using the bath during this period were:

Organised Parties

Sessions for:

Local Authority Schools	.. ..	17,896
Private Schools	.. ..	1,572
Youth Organisations	.. ..	712
Mixed Bathing	.. ..	8,529
Women and Girls	.. ..	1,396
Men and Boys	.. ..	1,940
		<hr/> 32,045 <hr/>

The users in the previous six years were:

1950	.. ..	11,521
1951	.. ..	11,533
1952	.. ..	18,290
1953	.. ..	21,842
1954	.. ..	22,420
1955	.. ..	25,521

Regular routine tests of the chlorine content of the water were carried out every two hours by the Attendant-in-Charge and regular samples of the bath water taken for bacteriological examination.

SECTION F

WELFARE SERVICES

National Assistance Act:

- Provision of Accommodation
- Blind and Partially Sighted Persons
- Other Handicapped Persons
- Registration of Homes
- Care of Property
- Burials

GENERAL

The problem of the care of the aged, which is the main object of the Council's duties under the Act, continued to be acute.

In view of the close link between the Mental Health, Home Help, Home Nursing, Health Visiting, and Welfare Services, it is in my opinion fortunate that in Eastbourne all these services are administered within the same Department, a condition which unfortunately does not apply in the country as a whole. A great deal of the difficulties encountered today, e.g. as between Hospital and Local Authority in regard to the aged, springs from divided responsibilities, but at least that does not arise locally between the Health and Welfare Authority.

RESIDENTIAL ACCOMMODATION—Section 21 (1) (a)

As envisaged in the 1956 Report, Staveley Court, the Council's third Home, opened to receive the first residents in December. This Home is based on the need to provide for the more infirm and has a lift installed.

Accommodation in all the Homes remained at capacity throughout the year: the waiting list of urgent cases referred to in my last Report remains. It can, however, be stated that no cases of serious hardship have been refused admission.

At the end of the year there were 80 cases in the Council's Homes and 58 in voluntary Homes, including 31 in St. Luke's Homes, all but 8 of whom have at the time of writing been transferred to Staveley Court. During the year there were 37 discharges, mainly to hospital, 25 deaths (14 in St. Luke's) and 62 admissions.

Statistics for the year are as follows:

1. <i>Cavendish Lodge:</i>					<i>Men</i>
On 31st December, 1955	..	..	..	..	24
Admitted during the year	..	..	..	..	14
Discharged during the year	..	..	..	..	13
Died .. .. .	..	..	..	..	2
On 31st December, 1956	..	..	..	..	23
2. <i>Trevin Towers:</i>					<i>Men Women</i>
On 31st December, 1955	..	..	..	5	40
Admitted during the year	..	..	..	3	17
Discharged during the year	..	..	..	2	10
Died .. .. .	..	..	..	—	8
On 31st December, 1956	..	..	..	6	39
3. <i>St. Luke's Home:</i>					
On 31st December, 1955	..	..	..	1	33
Admitted during the year	..	..	..	1	27
Discharged during the year	..	..	..	2	14
Died .. .. .	..	..	..	—	15
On 31st December, 1956	..	..	..	—	31

4. *Staveley Court (opened December, 1956):*

Admitted	..	..	..	..	..	8	4
Discharged	..	..	..	..	..	—	—
Died	..	..	..	..	..	—	—
On 31st December, 1956	..	..	..	..	..	8	4

5. *Voluntary Homes:*

Bernhard Baron Cottage Homes, Polegate	1 woman
Salvation Army Home, Wokingham ..	1 woman
Royal National Institute for the Blind, West-cliffe House, Westgate	1 woman
"Osidge" Chaseside (Sir Thomas Lipton Memorial Hostel)	1 woman
Searchlight Cripples Workshop (Newhaven)	1 man
Brighton and Hove Jewish Home for the Aged	1 woman
Blesma Home, Portsmouth	1 man
W.V.S. Home, Hove	1 woman

6. *Accommodation by Other Authorities:*

L.C.C. Home, 9 Fitzjohn's Avenue, London	1 woman
--	---------

7. (a) *Blind:*

The Wolds, College Road:

On 31st December, 1955	..	..	..	..	19
Admitted during the year	..	..	..	..	14
Discharged during the year	..	..	..	..	12
Died .. ..	..	..	..	..	2
On 31st December, 1956	..	..	..	..	19

(b) *Epileptics*—The man in Chalfont Colony at the end of 1955 took his discharge. One male case was taken over from the School Health Service on attaining the age of 18 and was resident on 31st December, 1956.

Accommodation for Temporarily Homeless—Section 21 (1) (b):

The Knowle:

During the year 7 families, comprising 4 men, 7 women, and 16 children were admitted. All of these had been evicted from their accommodation for various reasons. Eight families were discharged during the year, consisting of 6 men, 8 women, and 15 children, leaving at the end of the year 4 families of 3 men, 4 women, and 11 children.

House of the Good Shepherd:

Two women each with a child were accommodated during the year.

Reception Centre—Section 17:

This accommodation for persons without any fixed place of abode continued to be provided for men only in premises at the entrance to St. Mary's Hospital, the Hospital Secretary acting as Superintendent of the Centre. The accommodation is for 11 and on inclement nights three other beds can be added. The Centre was full to capacity on 85 nights, the average occupancy throughout the year being 7·28.

HANDICAPPED PERSONS—Section 29

(a) *Blind Persons.*

(i) *Incidence of Blindness:* During the year 30 B.D.8 Forms for new cases were received: the causes of disability and treatment in respect of the cases certified as blind being as stated in the table below:

	Cause of Disability			
	Cataract	Glaucoma	Retrolental Fibroplasia	Others
(1) Number of cases registered during the year in respect of which Section F of Forms B.D.8 recommends:				
(a) No treatment ..	2	2	—	6
(b) Treatment (medical, surgical or optical) ..	7	3	—	10
(2) Number of cases at 1 (b) above which on follow-up action have received treatment	1	—	—	12

The recommendations for treatment were mainly Medical and Hospital supervision.

(ii) *Registration:*

Total at December 31st, 1955	..	..	..	216
Total at December 31st, 1956	..	..	..	220
Registered during the year	..	..	..	30
Died during the year ..	..	..	..	28
Transfers from other areas ..	..	..	..	10
Transferred to other areas ..	..	..	..	5
Re-certified and 1 transferred to Partially Sighted Register .. .. .	..	..	..	3

<i>Age Group</i>	<i>Males</i>	<i>Females</i>	<i>Total</i>
Under 5 years	—	—	—
Between 5 and 15 years	1	—	1
Between 15 and 30 years	3	2	5
Between 30 and 50 years	13	6	19
Between 50 and 70 years	29	28	57
70 years and over	40	98	138
TOTALS	86	134	220

At the end of the year of the persons on the Register aged 60 and over 47 had cataract, 20 glaucoma and 8 cataract and glaucoma.

(iii) *Home Workers*: One blind man was included in the Home Workers Scheme of the National Institute for the Blind as a basket maker.

(iv) *Workshops*: One blind girl remained at the Barclay School for Partially Sighted Girls Workshop at Brighton.

(b) *Partially Sighted Persons*: The Council's scheme provides that the services for the blind shall also be generally available for the partially sighted. At the end of the year there were 82 partially sighted persons on the Register—16 male and 66 female.

(c) *Voluntary Services*: The Society for the Social Welfare of the Blind who receive an annual grant of £25 provide a club on three afternoons per week, a monthly social, annual outing and a bowling club which has been very successful, and presents for all on the Register at Christmas.

(d) *Deaf and Dumb*: The Chichester Diocesan Association for the Deaf and Dumb continued to act as agents. The former capitation grant was replaced by a block grant of £50. The services of an Assistant Missioner resident at Hastings are available to those needing him. In addition there is a club at Hastings to which Eastbourne members are given travel facilities and a service in sign language at St. Mary's Hospital Chapel. The number on the Register at the end of the year was 12, including 3 deaf blind.

(e) *Hard of Hearing*: Eastbourne and District Hard of Hearing Association who receive a grant of £25 continued to provide a very varied social programme for some 150 persons. The number registered at the end of the year was 40 and a team of social workers do home visiting to those requiring it.

(f) *Cripples*: (i) Eastbourne Voluntary Association for the Care of Cripples acting as agents received a grant of £15 plus a capitation fee of 35s. per annum. The Association provides a handicraft centre operating on one day per week in a church hall and at the time of writing endeavours are being made to establish a permanent

centre. Outings and entertainments are also arranged by the Association. There is a Case Secretary who co-ordinates the work of an efficient visiting service. The average number on the Register throughout the year was 86.75 and the actual number at 31st December was 85. Cases not falling into a category to be dealt with by the Association are visited by the District Health Visitor.

(ii) *Assistance with Alterations*: During the year six persons on the handicapped register have been assisted with alterations to their homes at a total cost of £100 to enable mechanically propelled vehicles to be garaged. The Ministry of Health provides the vehicle and in certain cases the wooden garage.

OLD PEOPLE'S ORGANISATIONS

Meals on Wheels. Once again tribute must be paid to this work of the W.V.S. During the year 9,098 meals were supplied, an average of 34.95 per day. The cost to the Council being £196 18s. 10d.

Eastbourne Old People's Welfare Committee. This body continued to hold meetings during the year.

Old Peoples' Clubs. There have been no alterations since my last report.

British Red Cross Society—Chiropody Service. I would once again like to pay tribute to the great need met by this service. The gap in the Health Service has not so far been filled and no official action can be taken to provide the service much required by old people.

Visiting Scheme. A very successful experiment has been started by the use of one Health Visitor dealing with aged persons, this is in addition to the Geriatric Health Visitor acting in co-operation with the Hospital Authorities.

REGISTRATION OF HOMES—Section 47

Fourteen registered Homes provide between them 198 beds for old, disabled and handicapped persons.

CARE OF PROPERTY

At the end of the year the property of 30 persons in Hospital or Part III accommodation was being cared for.

BURIALS

During the year 9 burials were arranged at a total cost of £178 15s. 6d. of which sum £56 10s. 7d. was recovered.

REPORT OF THE CHIEF PUBLIC HEALTH INSPECTOR

ESTABLISHMENT

Chief Public Health Inspector
Deputy Chief Public Health Inspector
4 District Public Health Inspectors

SANITARY ADMINISTRATION

GENERAL SUMMARY

Visits and inspections made during the year:

For general public health purposes	..	..	3,977
Housing	..	..	895
Food and Food Premises	..	..	3,718
Infectious Diseases	..	..	80
Rodent Control	..	..	338
Miscellaneous	..	..	1,322
Total	..	..	10,330

INSPECTION OF FOOD AND FOOD PREMISES

On the 1st January, 1956, the major portion of the Food Hygiene Regulations, 1955, came into operation and for the first time Public Health Officers were provided with an effective legal code with which to ensure as far as practicable the application of reasonable hygienic principles in the battle against food poisoning. The remaining provisions of the regulations became operative on 1st July.

In a health resort such as Eastbourne, catering as it does for so many visitors, the task of enforcing the requirements of the Regulations appeared formidable, faced as we were with whole streets of private hotels, boarding and guest houses of all sizes, together with schools and other institutions to which the provisions of the Food and Drugs Act had not previously applied.

Bald statistics do not readily indicate the amount of work involved as in practically all premises it was necessary to devote time to an explanation of the Regulations and their requirements and also to use the visit advantageously for the education of the occupier and food handling staff in the principles of food hygiene and the prevention of food poisoning, impressing in detail those requirements of the Regulations which deal personally with food handlers and those which require structural works. Action was first directed to those many premises in which food is prepared for immediate consumption.

Generally, the policy has been one of education and persuasion rather than legal enforcement and it is gratifying to record that by and large the installation of additional wash basins, sinks, cupboards, etc. has so far been carried out without resort to legal action. Quite early in the year a talk was given to members of the local Hotels and Restaurants Association, and copies of a summary of the Regulations were supplied to the Secretary for

distribution: a similar summary was left with the occupier of each premises visited if they did not already have a copy.

In order to ensure, as far as possible, that structural works were carried out on the right lines summaries dealing with the provision of fittings, etc., and the structural aspect of the Regulations were sent to each local Architect and Builder.

Food hygiene is such a personal matter. Whilst the officers of the Department have given a number of talks to various sections of the food trade, to food handlers and to other interested bodies, with films and/or visual aids, the Inspectors continued their policy of giving quiet talks and elementary demonstrations at the place of work during inspections, in this way endeavouring to cover even casual labour employed during the busy part of the season, and to emphasise at all times the necessity for personal cleanliness, the rapid cooling of cooked foods not intended for consumption immediately after cooking, and the cool storage of foodstuffs at all times.

The number of visits and inspections made to food premises, classified as to type, were:

Dairies and Milk Distributors	..	..	..	177
Ice Cream Manufacturers	..	..	..	134
Ice Cream Retailers	..	..	..	255
Bakehouses	..	..	..	37
Butchers' Shops and Wholesale Depots	..	..	..	285
Meat Products Preparation Premises	..	..	..	80
Fish Shops	..	..	..	103
Fried Fish Shops	..	..	..	34
Other Food Shops and Stores	..	..	..	422
Hotel and Restaurant kitchens	..	..	..	832
Slaughterhouses	..	..	..	581
Food Samples taken	..	..	..	524
Visits in connection with Unfit Food	..	..	..	224

The number of food premises in the Borough fell into the following classifications:

Bakers and Bakers Shops	..	..	..	40
Breweries	..	..	..	1
Butchers	..	..	..	42
Confectioners (other than flour confections)	..	..	..	92
Dairies	..	..	..	8
Delicatessen and Sandwich Shops	..	..	..	8
Fish and Fried Fish	..	..	..	31
Fruiterers and Greengrocers	..	..	..	73
Grocers, Provision and General Stores	..	..	..	143
Ice Cream Manufacturers	..	..	..	10
Premises where Ice Cream is sold	..	..	..	148
Ice Cream Store	..	..	..	1
Meat Products Factories	..	..	..	4
Public Houses and Hotels with open bars	..	..	..	56
Restaurants, Cafes and Snack Bars	..	..	..	121
Wholesale Manufacturers or Suppliers	..	..	..	7

The number of premises registered under Section 16 of the Food and Drugs Act, 1955, for the preparation or manufacture of sausages, or potted, pressed, pickled or preserved food intended for sale was:

Butchers Shops	..	..	..	34
Grocers and Provision Stores	..	..	..	18
Cooked Meat Manufacturer	..	..	..	1
Fried Fish Shops	..	..	..	8
Potato Crisp Manufacturer	..	..	..	1

MILK AND DAIRIES REGULATIONS

The Milk (Special Designations) (Specified Areas) Order, 1955, requires that all of the milk sold in Eastbourne shall be sold under a special designation. With the exception of a small proportion of farm bottled "Tuberculin Tested" milk practically all of the milk sold in the town is pasteurised. There is only one pasteurising establishment, but two firms import milk for sale locally which has been pasteurised in Brighton and Bexhill respectively. The untreated milk sold under the designation "Tuberculin Tested" is obtained from attested herds. There is a small quantity of Sterilised milk sold.

(a) Registration of Dairies and Distributors.

(i) The following were registered under these Regulations:

Dairies (Premises)	..	..	..	..	9
Distributors (Persons)	..	..	..	..	81

Of these one dairy and two distributors were registered only for the sale of cream.

(ii) Milk (Special Designation) Regulations

Licences granted were:

To Pasteurise Milk	..	..	..	..	1
Dealers' Licence to use the designation "Pasteurised"	..	..	..	..	75
Dealers' Licences to use the designation "Sterilised"	..	..	..	..	24
Dealers' Licences to use the designation "Tuberculin Tested"	..	..	..	..	22

(b) Sampling of Milk

Milk is sampled and examined broadly for three purposes: to ensure that the composition of the milk is up to the standard required; for testing as to cleanliness, keeping quality and effective pasteurisation; and for the presence of tuberculosis.

Samples taken for this purpose with the results of analysis or examination were as shown.

(i) Chemical Analysis

Seventeen samples were submitted for analysis, of which 2 were sold as Channel Island Milk.

The table shows the average composition of the samples and the average of the samples of Channel Island Milk.

<i>Samples taken</i>	<i>Milk Fat %</i>	<i>Milk Solids other than Milk Fat %</i>
Average for the Year	3.64	8.70
Richest Sample (December)	3.91	8.91
Lowest Sample (April) (excluding Channel Island Milk)	3.45	8.51
Average of Channel Island Milks ..	4.43	9.09
Requirements of the Sale of Milk Regulations	3.00	8.50
Requirements of the (Channel Island) Milk Regulations	4.00	

(ii) *Bacteriological Examination*

<i>Class of Milk</i>	<i>No. of Samples Tested</i>	<i>Appropriate Tests</i>	<i>Number of Samples</i>	
			<i>Passed</i>	<i>Failed</i>
Pasteurised ..	90	Phosphatase Methylene Blue ..	90 90	— —
Tuberculin Tested (Pasteurised)	24	Phosphatase Methylene Blue ...	24 24	— —
Tuberculin Tested (Farm Bottled Raw Milk) ..	47	Methylene Blue ..	40	7
Sterilised	20	Turbidity Test ..	20	—

Reports on the seven Tuberculin Tested (Farm Bottled) Milk Samples which failed the prescribed test were referred to the County Milk Production Officer for attention at the farms.

(iii) *Examination of Milk for the Presence of Tuberculosis*

By an arrangement with the Public Health Laboratory at Brighton samples of ordinary milk and of farm bottled milk are taken on a rota system during 48 weeks of the year. This arrangement is made to equalise the demand for guinea pigs.

Of the 71 samples taken, 65 proved to be negative and in 6 cases the guinea pig inoculated with the milk died shortly after the injection, the result was therefore void.

This is the first year in which M. Tuberculosis has not been found in milk samples. It may be that this is a result of the Ministry of Agriculture, Fisheries and Food's policy of free tuberculin testing of dairy animals on the farms as a preliminary to the extension of their Tuberculosis Eradication Area to include East Sussex and Kent.

MANUFACTURE AND SALE OF ICE CREAM

(a) *Registered Premises*

The number of premises registered for the manufacture, storage or sale of ice cream in accordance with Section 16 of the Food and Drugs Act, 1955, was:

(a) Wholesale Manufacturer	..	..	..	1
(b) Manufacture and Retail Sale	..	..	..	10
(c) For the Sale of Ice Cream	..	..	..	148
(d) For storage of Ice Cream for the Purpose of Sale				1

Visits and inspections of these premises totalled 389; 134 being to manufacturers premises and 255 to retailers.

(b) *Bacteriological Examination*

One hundred and sixty-three samples were taken. The bacteriologist classified them in the grades indicated below:

Grade 1	..	..	..	..	..	..	78
„ 2	..	..	..	..	..	..	68
„ 3	..	..	..	..	..	..	12
„ 4	..	..	..	..	..	..	5

89·6 of the samples taken fell into grades 1 and 2. Those classified in the lower grades were taken in the early part of the summer. Follow-up inspections at the manufacturers' premises ensured a more strict compliance with the Ice Cream (Heat Treatment) Regulations and resulted in the later samples being of a higher standard. Less soft ice cream is now being sold than in former years as individual manufacturers are falling out and supplies are mainly obtained from the larger factory producers who, in the main, deal only with hard ice cream. Practically all of this is factory wrapped.

SLAUGHTERING AND INSPECTION OF FOOD ANIMALS

Slaughtering in the Borough is now confined to one large wholesale slaughterhouse.

Meat inspection ranks as one of the most important functions of the Public Health Service and notwithstanding considerable evening and weekend work it is pleasing to report that all food animals slaughtered were inspected immediately after slaughter.

It will be noted that the number of cows found to be affected with tuberculosis has fallen still further, 12·9 per cent. being the lowest figure yet recorded. This, together with the absence of M. Tuberculosis referred to under Milk Sampling, is a desirable improvement evidently due to the field work of the Ministry of Agriculture, Fisheries and Food's veterinary officers in their campaign to extend the Tuberculosis Eradication Area previously mentioned.

Six bovine animals were found to be affected with *cysticercus bovis*, these animals probably being brought from some distance as cattle grazing on the Pevensey marshes are not normally in contact with this parasite.

CARCASES AND OFFAL INSPECTED AND CONDEMNED IN WHOLE OR IN PART

	<i>Cattle excluding Cows</i>	<i>Cows</i>	<i>Calves</i>	<i>Sheep and Lambs</i>	<i>Pigs</i>	<i>Horses</i>
Number killed	2082	318	2644	6183	7379	—
Number inspected ..	2082	318	2644	6183	7379	—
<i>All diseases except Tuberculosis and Cysticerci</i>						
Whole carcasses condemned	—	1	1	11	12	—
Carcasses of which some part or organ was condemned	875	192	4	700	433	—
Percentage of the number inspected affected with disease other than tuberculosis and cysticerci	42	60·7	0·2	11·5	6	—
<i>Tuberculosis only:</i>						
Whole carcasses condemned	2	4	1	—	—	—
Carcasses of which some part or organ was condemned	115	37	1	—	15	—
Percentage of the number inspected affected with tuberculosis	5·6	12·9	0·1	—	·2	—
<i>Cysticercosis:</i>						
Carcasses of which some part or organ was condemned	5	1	—			
Carcasses submitted to treatment by refrigeration	5	1	—			
Generalised and totally condemned	—	—	—			

INSPECTION OF OTHER FOODS

The following is a list of food stuffs voluntarily surrendered by the vendors on being found to be unfit for human consumption:

Bacon (lbs.)	24½	Honey (lbs.)	½
Bemax (pkts.)	11	Jam and Marmalade (lbs.) ..	21½
Biscuits (pkts.)	1	Jelly (pkts.)	1
Cake (lbs.)	49½	Macaroni (pkts.)	37
Cereal (pkts.)	5	Meat and Offal (lbs.)	1776
Cheese (lbs.)	37½	Meat Products (lbs.)	82½
Cheese (pkts.)	4	Meat (4 lb. and less cans) ..	173
Chocolate Sponges	17	Meat (over 4 lb. cans)	118
Coconut (pkts.)	1	Milk (cans)	74
Crab (stones)	2	Orange Juice (galls.)	3
Crab (cans and jars)	21	Paste, meat and fish (jars and cans)	10
Cream (cans and jars)	2	Peanut Butter (jars)	8
Edinburgh Rock (boxes) ..	1	Poultry (lbs.)	65½
Eggs (cans)	3	Ryvita (lbs.)	½
Eggs, frozen (lbs.)	84	Sandwich Spread (jars)	1
Fish (cans)	98	Sausages (lbs.)	69
Fish (stones)	84½	Sausages (cans)	10
Flour (lbs.)	3	Soup (cans)	41
Fruit (botts.)	4	Spaghetti, dry (cases)	3
Fruit (cans)	605	Sponge Mixture (cases)	5
Fruit, dried (lbs.)	165	Swiss Fondue (ozs.)	36
Grapes (lbs.)	10	Vegetables (cans)	520
Ham (lbs.)	426¾	Welsh Rarebit, Frozen (cartons)	1

Two hundred and twenty-four inspections were made in connection with the above unsound food.

The majority of this food stuff was dealt with in small quantities and was disposed of by burning at the refuse destructor.

Unfit meat from butchers' shops and wholesale stores is disposed of under suitable safeguards for sterilisation and processing into animal food stuffs, etc.

SAMPLING OF FOOD AND DRUGS

Samples of food and drugs were submitted to the Public Analyst as follows:

	Number Examined		Number Adulterated	
	Formal	Informal	Formal	Informal
Baking Powder	1	—	—	—
Batter Flour	1	—	—	—
Bread	—	2	—	1
Butter Creams	1	—	—	—
Butter and Margarine	8	1	—	—
Cake Mixtures	2	—	—	—
Camphor Syrup	—	1	—	—
Caraway Seeds	1	—	—	—
Cheese Spread	—	1	—	—
Chocolate Cornflour	1	—	—	—
Chocolate Crunch	1	—	—	—
Cocoa	1	—	—	—
Coconut	1	—	—	—
Congress Tarts	—	1	—	1
Cream	—	1	—	—
Currants	1	—	—	—
Curry Powder	—	1	—	—
Custard Powder	1	—	—	—
Fudge	—	1	—	—
Glace Cherries	2	—	—	—
Glycerine of Thymol Pastilles	—	1	—	—
Ground Almonds	3	—	—	—
Ground Ginger	1	—	—	—
Ham	—	1	—	1
Herbs	1	—	—	—
Honey	—	1	—	—
Horseradish Relish	—	1	—	—
Ice Cream	1	11	—	—
Jam	—	4	—	1
Jelly	1	2	—	—
Ketchup	—	1	—	—
Kiltie Crumbs	1	—	—	—
Lard	1	—	—	—
Lemonade Powder	—	1	—	—
Lemon Juice	1	—	—	—
Marmalade	—	1	—	1
Milk	16	1	—	1
Mustard	—	1	—	—
Mustard Sauce	—	1	—	—
Non-Brewed Condiment	1	—	—	—
Orange Squash, Orange Drink	2	1	—	—
Oxo Cubes	—	1	—	—
Paste	—	2	—	—
Pearl Barley	1	—	—	—
Pepper, Pepper Flavoured Con- diment	2	—	—	—
Pork Sausages	2	—	—	—
Rice	1	—	—	—
Rose Colouring	—	1	—	—
Salted Peanuts	—	1	—	—
Sauce	—	2	—	—
Savoury Straws	—	1	—	—
Soup	1	—	—	—
Stewed Steak (tinned)	—	1	—	—
Sugar	1	—	—	—
Sultanas	—	1	—	—
Sweets	2	—	—	—
Tea	4	—	—	—
Treacle	—	1	—	—
Vinegar	2	1	—	—
Whisky	1	—	—	—
TOTALS	68	49	—	6

ACTION TAKEN WITH RESPECT TO SAMPLES REPORTED AS UNSATISFACTORY BY THE PUBLIC ANALYST

Sample No. 101—Milk (Informal)

Deficient in Fat 43·3 per cent.

This sample, consisting of a quantity of milk in a milk bottle, brought to the office with the complaint that it was reconstituted from milk powder, was submitted for analysis. The Analyst reported that there was no evidence of milk powder or added water. From the low fat content he was of opinion that the sample represented the bottom portion of milk from an unshaken container, or that it had been partially skimmed.

No action was taken on the result of the analysis.

Sample No. 58—Congress Tarts (Informal)

Complaint of carbolic taste. No significant amount of phenols detected.

Sample No. 131—Bread (Informal)

Complaint of bread having very little flavour—this was due to the very low salt content (0·08%).

Sample No. 51—Ham (Informal)

Discoloured spots probably due to contact with metal. No measurable metallic contamination.

This sample was returned to the supplier by a customer. Investigation at the house indicated that the ham had been placed on a dish the plating which was much worn in places. No further action taken.

Sample No. 1031—Marmalade (Informal)

Deficient in Soluble Solids 8·3 per cent.

Sample No. 1032—Jam (Informal)

Deficient in Soluble Solids 12·0 per cent.

These two samples were of small quantities of home-made jam offered for sale, and the deficiencies were no doubt unintentional. Stock exhausted before formal sample could be taken. The attention of the vendor was drawn to the requirements of the Regulations.

HOUSING

The inspections made by the Public Health Inspectors for housing purposes were:

Dwelling Houses (Housing Act)	..	..	..	263
Dwelling Houses (Public Health Act)	..	..	..	149
Re-visits	..	..	..	483

CLEARANCE AREAS

Three groups of unfit houses were declared as Clearance Areas in 1956. Two were combined in one Clearance Order comprising 18 houses. This Order was subsequently confirmed by the Minister with modifications which excluded three of the houses from the Order.

A Compulsory Purchase Order was made with respect to the other area which also comprised 18 houses. This Order has as yet not been confirmed by the Minister.

HOUSING REPORT

The table which follows gives the totals of the quarterly reports submitted to the Ministry of Housing and Local Government as to action taken in 1956.

HOUSES IN CLEARANCE AREAS AND UNFIT HOUSES ELSEWHERE

(a) Houses Demolished

	HOUSES DEMOLISHED	DISPLACED during quarter	
		Persons	Families
IN CLEARANCE AREAS			
(Housing Act, 1936 and Housing Repairs and Rents Act, 1954)			
(1) Houses unfit for human habitation	12	34	11
(2) Houses included by reason of bad arrangement, etc.	—	—	—
(3) Houses on land acquired under Section 27, Housing Act, 1936	—	—	—
NOT IN CLEARANCE AREAS			
(4) As a result of formal or informal procedure under Section 11, Housing Act, 1936	1	2	1
b. Unfit houses closed			
	Number		
(5) Under Section 11, Housing Act, 1936 and Sections 10 (1) and 11 (2), Local Govt. (Misc. Prov.) Act, 1953	—	—	—
(6) Under Sections 3 (1) and 3 (2), Housing Act, 1949			
(7) Parts of buildings closed under Section 12, Housing Act, 1936	—	—	—

(c) *Unfit Houses Made Fit in which Defects were remedied*

	By Owner	By local Authority
(8) After informal action by local authority ..	94	—
(9) After formal notice under (a) Public Health Acts	8	—
(b) Housing Act, 1936	3	—
(10) Under Section 5, Housing Repairs and Rents Act, 1954	—	—

(d) *Unfit Houses in Temporary Use (Housing Repairs and Rents Act, 1954)*

	Number of Houses (1)	Number of separate dwellings contained in Column (1) (2)
Position at end of quarter		
(11) Retained for temporary accommodation		
(a) under Section 2	—	—
(b) under Section 3	—	—
(c) under Section 4	—	—
(12) Licensed for temporary occupation under Section 6	—	—

(e) *Purchase of Houses by Agreement*

	Number of Houses (1)	No. of occupants of houses in column (1) (2)
(13) Houses in Clearance Areas other than those included in confirmed Clearance Orders or Compulsory Purchase Orders, purchased in the quarter	—	—

HOUSING ACT, 1949—IMPROVEMENT GRANTS

Forty-nine applications for improvement grants were considered, all of which were approved in whole or in part. Two applications were subsequently withdrawn.

Of those approved, 20 were with respect to the installation of bathrooms, indoor sanitation and domestic hot water systems in owner occupied houses, 21 were for similar improvements by owners for the benefit of their tenants, 5 were for the division of larger properties into self-contained flats or separate houses and produced 11 separate dwellings from 5 premises, and one was for works carried out in an old house of some historic interest to enable it to be re-occupied.

HOUSING REPAIRS AND RENTS ACT, 1954—CERTIFICATES OF DISREPAIR

Application for Certificates of Disrepair	4
Certificates granted	3
Certificates refused	1
Applications for Revocation of Certificates of Disrepair ..	2
Certificates of Disrepair Revoked	2

From the above it will be seen that there is no incentive for landlords to spend money on repairing houses to obtain a slight increase in rent. One is forced to the opinion that on present rents owners are unable to afford the expenditure necessary to enable them to charge higher rents.

APPLICATIONS FOR HOUSING ACCOMMODATION, ETC.

I am indebted to the Housing Superintendent for the information contained in this table:

Total number of outstanding housing applications at 31st December, 1956	1,255
Number of families housed in requisitioned properties	139
Number of family units rehoused during 1956 ..	169
Number of houses and flats built by the Council in 1956	144

GENERAL INSPECTIONS FOR PUBLIC HEALTH PURPOSES

Visits and inspections made by the Public Health Inspectors for the above purposes were:

Complaints investigated	726
Schools	78
Camping Sites and Moveable Dwellings	118
Places of Public Entertainment	7
Public Baths	138
Drainage and Plumbing Works	895
Land Charges Enquiries	420
Stables and Piggeries	45
Smoke Observations	164
Factories	179
Workplaces	23
Outworkers' Premises	4
Shops (Section 38, Shops Act, 1950)	65
Departmental Properties	224
Re-visits	891
Infectious Disease Investigations	80
Miscellaneous Visits	1,322

STATUTORY NOTICES UNDER THE PUBLIC HEALTH ACT, 1936

By far the majority of cases of works necessary to abate nuisances and to deal with other matters falling to be dealt with under that part of the Public Health Act, 1936 were carried out following informal intimation by the Inspectors. There were, however, some cases in which it was necessary to serve formal notices, namely:

Section 39—Defective Drains	..	..	..	1
Section 75—To provide dustbins	..	..	..	14
Section 93—To abate nuisances	..	..	..	7
Section 138—To provide a supply of water for domestic purposes	..	..	..	1

As the Council has not adopted other methods for the provision of dustbins, it is necessary for each case for statutory action to be considered on its merits by the local authority. There have been no appeals against decisions of the Council in this respect.

MOVEABLE DWELLINGS AND CAMPING SITES

An area of 1.36 acres of land near the north-east boundary of the Borough is licensed as a permanent site for stationing 30 caravans. A sewage disposal plant is installed on the site. Applications were received as follows:

For licences to use land as a site for moveable dwellings (during the season only)	..	..	2
For licences to station individual caravans	..	..	5

SCHOOLS

The sanitary and washing facilities at schools under the control of the local authority were kept under observation. Some of the schools are provided with kitchens, others use a container service when the meals are supplied from the central school kitchen. In all cases particular attention was paid to the requirements of the Food Hygiene Regulations.

SHOPS ACT

Only Section 38 of the Shops Act, 1950, is administered by this Department. This section deals with the health, comfort, etc., of shop workers.

Failure to comply with the requirements of this section was dealt with without the necessity of formal action.

RAG FLOCK AND OTHER FILLING MATERIALS ACT

There were nine premises registered by the local authority under the provisions of this Act and frequent inspections were made to these premises to ensure that the provisions as to cleanliness of materials and bedding were complied with.

PET ANIMALS ACT, 1951

Seven applications for licences to keep pet shops were received during the year. Two of these applications were refused owing to unsatisfactory conditions at the premises concerned.

FERTILISERS AND FEEDING STUFFS ACT, 1926

Three samples of fertilisers and five of feeding stuffs were submitted for analysis in accordance with the requirements of the Fertilisers and Feeding Stuffs Regulations 1932 and 1951. One sample of feeding stuff contained 1·6 per cent. excess oil to that guaranteed. The statement was incorrect due to a printer's error and the Manager of the shop not checking the statement on a new consignment of meal with the printed statement on the invoice to customers.

FACTORIES ACTS, 1937 AND 1948

The following tables indicate the inspections made and action taken under the provisions of these Acts.

1. *Inspections for purposes of provisions as to health*

<i>Premises</i>	<i>Number on Register</i>	<i>Number of</i>		
		<i>Inspections</i>	<i>Written Notices</i>	<i>Occupiers Prosecuted</i>
(i) Factories in which Sections, 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	102	50	—	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	231	104	2	—
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)	77	25	2	—
TOTAL	410	179	4	—

2. Cases in which defects were found

	Number of cases in which defects were found				Number of cases in which prosecutions were instituted
	Found	Remedied	Referred		
			To H.M. Inspector	By H.M. Inspector	
Want of cleanliness (S.1)	8	9	—	—	—
Overcrowding (S.2) ..	—	—	—	—	—
Unreasonable temperature (S.3)	—	—	—	—	—
Inadequate ventilation (S.4)	1	1	—	—	—
Ineffective drainage of floors (S.6)	1	1	—	—	—
Sanitary Conveniences (S.7):					
(a) Insufficient ..	2	—	—	—	—
(b) Unsuitable or defective	5	4	—	—	—
(c) Not separate for sexes	—	—	—	—	—
Other offences against the Act (not including offences relating to Out-work)	1	1	1	—	—
TOTAL	18	16	1	—	—

PART VII OF THE ACT—OUTWORK
Sections 110 and 111

	Section 110		
	<i>No. of Out-Workers in August list required by Section 110 (1) (c)</i>	<i>No. of cases of default in sending lists to the Council</i>	<i>No. of prosecutions for failure to supply lists</i>
Making, altering, etc., of wearing apparel	31	—	—
Household linen	3	—	—
Curtains and furniture hangings	6	—	—
Furniture and upholstery ..	9	—	—
Umbrellas, etc.	2	—	—
The making of boxes or other receptacles or parts thereof made wholly or partially of paper	1	—	—
TOTAL	52	—	—

Section 111. There were no instances found of work being done by outworkers in unwholesome premises.

RODENT CONTROL

The Prevention of Damage by Pests Act, 1949 requires that the local authority shall carry out a continuous survey and inspection to ascertain the presence of rats and mice and to take action for their destruction. For this purpose two rodent operators are employed.

The Council provides a free service in connection with private dwelling houses, but a charge is made in the case of business and other premises for destruction of rats and mice.

From the following table it will be seen that progressively the number of major infestations of rats has reduced but unfortunately there is a large pocket of infestation in the foul sewers. Constant survey and attention has, however, prevented any break out. It is found in practice that it is necessary for the Council's operators to deal with all infestations found, both of rats and mice, as there is a general lack of commercial servicing in the neighbourhood.

At all times it is impressed on occupiers that it is their duty to deal with the presence of these rodents.

SURFACE CONTROL

	TYPE OF PROPERTY				
	<i>Local Authority</i>	<i>Dwelling Houses</i>	<i>Agri-cultural</i>	<i>Business</i>	<i>Total</i>
Number:					
Inspected on Complaint..	14	236	—	24	266
Inspected on Survey or Investigation	99	625	24	298	1046
Found to be infested by:					
Rats (a) Major ..	—	3	—	1	4
(b) Minor ..	2	217	2	19	240
Mice (a) Major ..	9	4	—	28	41
(b) Minor ..	13	205	—	17	235
Treated by Operators ..	24	429	2	65	520
Visits for all purposes ..	372	5153	36	964	6525

Number of block control schemes carried out .. 17

SEWER BAITING

Sewer baiting treatments are carried out via the street manholes twice in each year, namely May and November. Prior to the first treatment a test baiting was carried out at 10 per cent. of the sewer manholes in the areas which had previously been clear of rats: in only two of the 109 manholes baited were rats found. This indicates, therefore, that the sewers to which access is obtained from 1,070 manholes were clear.

With the present methods of treatment we do not make much progress in one portion of the sewers, as the following table indicates, the infestation remains practically constant.

SUMMARY OF THE RESULT OF SEWER MAINTENANCE TREATMENT IN THE AREA TREATED

	<i>May</i>	<i>November</i>
Manholes baited	364	365
Complete take of baits	210	237
Partial take of baits	57	29
No take	97	99

It would appear that we do no more than keep the number of rats down in competition with the normal breeding rate of the specie. The baits deposited do not attract all of the rats as the sewers carry a considerable quantity of food matter washed into the drains from hotels, etc. Regular treatment of the sewers undoubtedly keeps down the number of surface infestations.

SCHOOL HEALTH SERVICE

SCHOOL HEALTH DEPARTMENT,
AVENUE HOUSE,
EASTBOURNE.

To the Chairman and Members of the Education Committee.

LADIES AND GENTLEMEN,

I have the honour to present to you the forty-ninth Annual Report on the health of the school child and the work of the School Health Department.

The slight increase in the number of children, now almost one in four, found to have defects at routine school medical examinations, spotlights once again the importance of this systematic detailed review by a doctor. Defects often develop so gradually and insidiously that parents and those who live with children do not notice, or having noticed are not stirred into action by, abnormalities which might well lead to trouble. To the doctor, and often to the school nurse, who has a very wide experience of the normal, these are at once apparent. With the co-operation of the parent the many ancillary facilities of the School Health Service can then bring the child back into the path of healthy growth. The co-operation of the parent is, however, vital and it is most encouraging to see the increase there has been in the number of parents attending with their children at these examinations. It is to be hoped that parents and teachers will never hesitate to bring to the attention of the doctor any child who is not due for a periodic examination but in whom any defect—however slight—is suspected.

While the commoner infectious diseases with the exception of measles, were infrequent and gave the school nurses much less concern than in other years, the perplexing problem of plantar warts continued to increase in prominence. Determined efforts were made by routine foot inspections and vigorous treatment to curtail their spread, but the onset often causes so little inconvenience that a child will infect a number of others before being aware of the existence of the wart.

Defects in the muscle tone and formation of their feet continued to be common and to threaten children with painful feet in later adult life. This is a field where much can be done and it is encouraging to see that attendances at the clinic for foot exercises have markedly increased this year. One also has the impression that parents are taking much more trouble to see that their children wear suitable shoes than was the case some years ago.

Diphtheria immunisations have been maintained at a level of which Eastbourne may be proud, and it is to be hoped that this will be maintained after the introduction of Poliomyelitis vaccination.

A further innovation was the offer of B.C.G. vaccination against tuberculosis to thirteen-year-old schoolchildren. With the helpful co-operation of parents and head teachers, consent forms were readily signed and skin tests and vaccinations were carried out on school premises with a minimum of disturbance to school routine. Whilst our greatest hopes in this campaign lie in the prevention of tuberculosis among the vaccinated children, it is to be noted that the carrying out of the preliminary tests was also of value in bringing under observation three children who had already sustained early infection.

At times children are brought to the attention of my staff because they are two or three years behind the others of their class in their school work. With the new and vigorous school at the Swallow's Nest we are able to offer these children great help—a help which is not merely a diluted normal schooling, but a skilled and specialist form of education using modern techniques elaborated in the universities. Each child receives a medical examination every term to ensure that physical factors shall not add to the disheartening difficulties he has been wilting under in his previous school, and we can expect that these children, otherwise penalised for no fault of their own, may be given an equal chance with others when they leave school.

New cases referred to the Child Guidance Clinic during the year again show an increase in numbers. It is only to be expected that the current high incidence of mental ill-health in adults will be reflected in increased demands on the Child Guidance Service. Lack of responsibility and instability in parents is known to have a profound influence in the mental development of offspring. Our health education activities therefore continue to give emphasis to the importance of the integrity of family life, of sensibly manifested love and affection by parents for their children and of the Christian home as being the surest means of attaining these ideals.

I thank you, Mr. Chairman, and members of the Education Committee, most sincerely for your support through the year. My thanks are also due to the Chief Education Officer and to his teaching staff for their constant helpful co-operation.

I am,

Your obedient Servant,

KENNETH VICKERY,

Principal School Medical Officer.

EDUCATION COMMITTEE

(as constituted at 31st December, 1956)

The Mayor:

Alderman S. M. CAFFYN, J.P.

Chairman:

Councillor W. P. LEBBON

Deputy Chairman:

Councillor W. E. HAFFENDEN

Co-opted Members:

Rev. Canon L. E. MEREDITH
Rev. Dr. J. J. CURTIN
Rev. G. E. HICKMAN JOHNSON
Mr. F. JONES
Mr. A. WILKINSON
Mrs. I. A. SNELL

Councillors:

E. O. FINCH
Mrs. E. V. F. FORDHAM
G. S. FOYLE
A. G. E. JUDGE
L. A. VICKERS
F. A. POPE
B. C. WILLIAMS
H. W. WENHAM
T. ALSTON
H. J. MEPHAM
S. R. TOMPSETT
Mrs. K. J. UNDERHAY

SCHOOL HEALTH SERVICE

(a) Full-time Officers

Principal School Medical Officer:

K. O. A. VICKERY, M.D., B.S.(Lond.), M.R.C.S., L.R.C.P., D.P.H.

Deputy Principal School Medical Officer:

ERIC W. WRIGHT, M.B., Ch.B., D.P.H.

School Medical Officer:

MARJORIE I. GODSON, M.B., Ch.B.

Principal School Dental Officer:

MAURICE G. BERRY, L.D.S., R.C.S.

School Dental Officer:

J. W. MARTIN, L.D.S.

School Nurses:

Mrs. S. M. JAMES (Senior), S.R.N., H.V.Cert. (from 21.9.56).
Miss K. M. AVIS (Senior), S.R.N., H.V.Cert., Public Health Nursing Administration Certificate (to 20.9.56).
Miss J. C. M. BERK, S.R.N., H.V.Cert.
Miss E. L. CLARK, S.R.N., H.V.Cert.
Mrs. W. CLEMENTS, S.R.N., S.C.M., H.V.Cert. (to 13.1.56).
Mrs. D. I. DALE, S.R.N., S.C.M., H.V.Cert. (from 1.2.56).
Mrs. L. FOSTER, S.R.N., S.C.M., H.V.Cert.
Miss E. E. GRIFFIN, S.R.N., S.C.M., H.V.Cert.
Miss M. G. HEMMING, S.R.N., H.V.Cert.
Miss B. J. HUDSON, S.R.N., S.C.M., H.V.Cert (from 6.2.56).
Mrs. S. M. JAMES, S.R.N., H.V.Cert. (to 20.9.56).
Miss M. J. PARTRIDGE, S.R.N., S.C.M., H.V.Cert.

(The School Nurses are also Health Visitors)

Clerks:

Miss B. DOUCH (Senior)
Miss B. M. CARTWRIGHT
Miss J. MARKWICK

Dental Attendants:

Mrs. D. S. ANDREWS (to 7.1.56)
Miss D. D. SIDLEY
Miss A. SLADE

(b) Part-time Officers

Orthodontic Specialist:

NORMAN GRAY, F.D.S., R.C.S., H.D.D., L.D.S., Dip. Orth. R.C.S.

Orthodontic Assistant:

H. G. GRIFFITH, B.D.S., L.D.S., R.C.S.

Child Guidance Service:

DORIS KATHLEEN SMALL, L.R.C.P., L.R.C.S., D.P.M.
Dr. HUGH ELWELL, M.A., M.R.C.S., L.R.C.P., D.P.M.
Miss M. LOGG, B.A., Dip. Psych. Educational Psychologist.
Mrs. M. SCOTT, M.A., Psychiatric Social Worker (from 1.7.56).
Miss E. D. SMITH, Clerk (to October).
Miss C. LYNCH, Clerk (from October).

Speech Therapist:

Mrs. K. HANSFORD, L.C.S.T.

CLINICS

The various Clinics were held as follows:

EXAMINATION

Acacia Villa	..	..	..	Fourth Friday, 10 a.m.
Avenue House	..	..	..	Thursday, 2.15 p.m.
Hampden Park Secondary School				
or Highfield Primary School	..			Second Wednesday, 2.15 p.m.
(Additional Clinics were held at all four centres and at Green Street as and when required.)				

MINOR AILMENTS

Acacia Villa	..	..	..	Daily, 9 a.m.
Avenue House	..	..	..	Daily, 9 a.m.
Hampden Park Hall	..	..	..	Monday, Wednesday and Friday, 9 a.m.
Open Air School	..	..	..	Monday, Wednesday and Friday, 9 a.m.
Green Street	..	..	..	Daily, 9 a.m.
Langney Village Hall	..	..	..	Monday, Wednesday and Friday, 9 a.m.

SPEECH THERAPY

Avenue House	..	..	..	Tuesday and Wednesday during School Terms, 9.15 a.m. and 2.15 p.m.
				Hampden Park Infants School
				The Open Air School

CHILD GUIDANCE

Avenue House:				
Psychiatrist	..	..	..	Friday, 9 a.m. and 2 p.m.
Educational Psychologist	..	..	..	Tuesday, 2 p.m.
				Friday, 9 a.m. and 2 p.m.

OPHTHALMIC

Princess Alice Hospital	Special sessions fortnightly, Friday, 9.30 a.m.
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DENTAL

Avenue House	Daily, 9 a.m. and 2 p.m.
Anaesthetic Sessions	Tuesday and Thursday, 9.30 a.m.
Orthodontic Sessions	..	..	..	Friday, 9 a.m.

CONTENTS

1. Statistics.
2. School Hygiene.
3. Personal Hygiene.
4. Medical and Special Inspections.
5. Follow Up.
6. Arrangements for Treatment.
7. Child Guidance Clinic (Psychiatrist's Report).
8. Handicapped Children.
9. Special Tuition.
10. Dental Care (Report of Principal School Dental Officer).
11. Difficult and Problem Families.
12. Employment of Children.
13. Provision of Clothing.
14. School Meals and Milk.
15. Infectious Disease.
16. Tuberculosis.
17. Immunisation.
18. Deaths.
19. Training Colleges.

1. STATISTICS

The number of children on the School registers on re-opening in January was 6,661 and 6,601 by the end of the year. There were 868 children admitted during the year, and the net increase compared with the end of 1955 was 15.

The average attendance of children for the year was 6,224, a percentage of 93·04.

TOTAL NUMBER OF CHILDREN

At Primary Schools	...	...	...	...	3,941
At Secondary Schools including Grammar Schools					2,584
At Day Special Schools	...	...	...	...	76
				TOTAL	6,601

2. SCHOOL HYGIENE

Standards of hygiene of school premises continued to be satisfactory except in one or two of the older schools which are due to be re-built shortly. In these the highest standard possible with inadequate facilities was maintained.

3. PERSONAL HYGIENE

The School Nurses continued their routine term visits to schools to inspect the children for head and general cleanliness. This is no longer a serious problem but vigilance is maintained to ensure that the few infested children do not infect others. This frequent contact with the child by a trained nurse is of great value in assessing individual health.

Total number of examinations in the schools by the school nurses	... ..	12,909
Total number of individual pupils found to be infested	... ..	48

4. MEDICAL INSPECTION

Periodic Medical Inspections of pupils were carried out in the following age groups:

- Entrants.* Pupils admitted for the first time to a maintained school.
- 10 Year Old Groups.* Pupils attending a maintained Primary School on attaining the age of ten years.
- 14 Year Old Groups.* Pupils seen in the year prior to that in which they will be leaving school.
- Additional Periodic Inspections.* Pupils attending a maintained school who missed the usual periodic examination.

Total number examined in these age groups was 1,900. A percentage of 23.05 was found to have one or more defects other than dental disease or infestation with vermin requiring treatment.

GENERAL CONDITION OF CHILDREN INSPECTED

An estimate of the child's physical condition at the time of inspection was made and the children classified as follows:

Satisfactory	... ..	1,855 (97.63 per cent.)
Unsatisfactory	... ..	45 (2.37 per cent.)

The percentage of parents who were present during the periodic medical inspections was 76.32. This is a noticeable increase over previous years. In the younger age groups the value of the inspection is greatly enhanced by this contact between doctor, parent, school nurse and teacher.

SPECIAL INSPECTIONS

A total of 1,022 children were brought to the notice of the School Medical Officers by parents, teachers and school nurses. As years pass between periodic inspections by the doctor, those dealing with children are greatly to be encouraged in bringing any doubt they may have to his notice.

In addition, 1,135 children who were noted at a previous periodic or special examination, were seen by the Medical Officers.

5. FOLLOW-UP

The necessary "follow-up" work in the homes and in the schools is done by the School Nurses:

Number of visits by Nurses to schools	329
Number of visits by Nurses to schools for medical inspection	173
Number of visits to homes of children by Nurses	363

6. ARRANGEMENTS FOR TREATMENT

Children who had defects were referred to their family doctor, to hospital for specialist opinion, or to the School Clinic for treatment for minor ailments and other special defects.

MINOR AILMENT CLINICS

	1955	1956
Total number of children who attended	656	587
Total attendances made	1,586	2,364
Total number of defects treated ...	591	595

Conditions treated were:

Impetigo	53	25
Eye Diseases (external)... ..	72	43
Ear Diseases	27	16
Other skin diseases (boils, septic conditions, etc.)	156	320
Miscellaneous (sprains, burns, cuts, etc.)	283	191
Total ...	<u>591</u>	<u>595</u>

SKIN CONDITIONS

The increase noted under "other skin diseases" can be attributed to some extent to the greater efforts made during the year in the search for, and treatment of plantar warts.

It is pleasing to see that the incidence of impetigo has declined again as it is an unpleasant and contagious condition which should be preventable.

PLANTAR WARTS

One hundred and seven children were known to have attended hospital for the treatment of this condition compared with 92 in the previous year.

The incidence of warts continues to increase and is now proving a perplexing problem. As an experiment this year, all cases occurring in the High School were treated at school (unless they wished to attend their own Doctor) and this proved profitable though time consuming. Foot inspections of older children were carried out every term and this may have to be extended to younger children also. The difficulty is that many warts though infectious are not painful and one child in a swimming bath can infect a dozen others.

CHIROPODY

Monthly chiropody sessions continued throughout the year. In May Mr. A. E. Cole, M.Ch.S., resigned his position as chiropodist and Miss M. E. Winstanley, M.Ch.S., was appointed to fill the vacancy. Forty-four children made 99 attendances for treatment of corns, callosities and minor foot defects.

VISUAL DEFECTS

Using Snellens Eye Card or pictorial charts the vision of children in all schools was tested in the age groups: 5, 7, 10, 12, 14 and 17 years.

	<i>New Cases</i>		<i>Old Cases</i>	
	1955	1956	1955	1956
No. of cases referred to Ophthalmic Clinic	186	162	277	299
No. attendances made	212	209	307	339
Glasses prescribed	128	106	173	175

It is still common to meet children who attend faithfully all Clinics, etc., with a view to the prescription and supply of glasses but who do not wear them once they are obtained. One can understand a child not wishing to suffer the ridicule of his class mates but the co-operation of parents on this matter would be welcome.

Children suffering from squint were supervised at the hospital Ophthalmic Clinic where orthoptic treatment was given where necessary.

EAR, NOSE AND THROAT DEFECTS

Children suffering from squint were supervised at the hospital as previously. The number of children suffering from otitis media was small. Of the 342 school leavers examined, 18 had a history of previous otitis media and 4 had defective hearing.

In accordance with a memorandum from the Ministry of Education a summary was made at the time of the Periodic

Medical Inspection of all children who had had tonsillectomy at any time previously. It is given below.

<i>Entrants</i>	<i>10 Year Old</i>	<i>Leavers</i>	<i>Other</i>	
69	122	168	44 =	403 had had
				tonsillectomy
779	476	473	172 =	1,900 were examined
8.85%	25.63%	35.51%	25.56%	= 21.21%

ORTHOPAEDIC DEFECTS

Children suffering from significant departures from the normal were referred to the hospital orthopaedic department for advice and treatment.

A weekly clinic for remedial and breathing exercises was continued at Avenue House during the year.

Foot Exercises

Total number of children who attended	...	40
Total number of attendances made	... ..	392

Breathing Exercises

Total number of children who attended	...	47
Total number of attendances made	... ..	455
Referred to Chelsea College	... ..	6

This treatment clinic is additional to those already in operation in schools suitable for the purpose, and the exercises were given by the Third Year students from the Chelsea College of Physical Education. These classes, wherever held, are of very definite benefit to the children.

OTHER DEFECTS

Asthma is still commonly encountered and colds and respiratory infections continue to account for much absenteeism at school. The small number of children with heart disease, epilepsy, chronic lung affections and so on are watched throughout their school career and every co-operation with parents, teachers, and finally the Youth Employment Officer is sought in order to launch them into adult life as independent and productive members of the community.

SPEECH DEFECTS. *Report of the Speech Therapist*

During the school terms four speech therapy sessions were held each week at Avenue House; in addition a weekly session was held

at the Open Air School and in October a weekly session was held at Hampden Park Infants School.

Number of cases under treatment at the beginning of the year	...	...	...	...	...	37
New cases referred during the year	...	...	...	...	...	44
Number of cases discharged	...	...	...	...	...	27
Total number of cases treated	...	...	...	...	...	71
Number of cases under treatment at the end of year	...	...	...	...	...	44
Number of cases waiting for treatment	...	...	...	...	...	10
Cases under school age treated during the year	...	...	...	...	...	7
Number of clinic sessions held during the year	...	...	...	...	...	164
Number of visits to schools and homes	...	...	...	...	...	19
Number of visits to Hampden Park Infants School	...	...	...	...	...	10
Number of visits to Open Air School	...	...	...	...	...	36
Total number of attendances made by children under school age	...	...	...	...	...	81
Total number of attendances made by school children	...	...	...	...	...	1,075

<i>Type of defect treated</i>	<i>Cases</i>	<i>Discharged</i>
Stammer	9	1
Dyslalia	32	16
Sigmatism	13	5
Cleft palate	2	—
Spastic speech	2	—
Nasality	1	—
Deaf	1	1
Delayed speech	8	2
Other defects	3	2
	71	27
	—	—

7. CHILD GUIDANCE SERVICE

REPORT OF THE CHILD PSYCHIATRIST

Statistics relating to Eastbourne children:

Number of Sessions	...	...	...	...	...	117
Cases seen:						
Old	...	...	...	...	...	47
New	...	...	...	...	...	39
						86
Total number of attendances	...	...	...	...	...	755
New cases referred during 1956	...	...	...	...	...	92
Cases treated:						
By Psychiatrist	...	...	...	...	...	47
By Psychologist	...	...	...	...	...	21
(excluding those seen by Psychiatrist)						—
						68

Waiting List:

1st January 1956	...	...	...	...	27
31st December 1956	...	...	...	...	36

Analysis of New Cases:

A. Source:

School Health Service	...	...	...	...	82
Parents	...	...	...	...	3
Probation Officers	...	...	...	...	1
Medical Practitioners	...	...	...	...	4
Other Agencies	...	...	...	...	2
					— 92

B. Problems:

Nervous disorders	...	...	...	...	15
Habit disorders	...	...	...	...	1
Behaviour problem	...	...	...	...	27
Educational and Vocational problems	...	...	...	...	47
Delinquency	...	...	...	...	2
					— 92

Analysis of cases seen during 1956:

A. By Psychiatrist:

Diagnosis	...	...	...	...	39
Treatment	...	...	...	...	47

NOTE: 9 parents were seen by Psychiatrist. Number of attendances 11.

Analysis of diagnostic cases:

Diagnosis and advice	...	...	...	...	12
Under treatment	...	...	...	...	17
Awaiting treatment	...	...	...	...	4
Hospital treatment advised for mother	...	...	...	...	6
					— 39

Analysis of treatment cases:

Satisfactorily adjusted	...	...	...	...	3
Much improved	...	...	...	...	1
Still under treatment	...	...	...	...	24
Periodic supervision	...	...	...	...	18
Admitted to Lady Chichester Hospital	1
					— 47

B. By Psychologist:

For ascertainment of I.Q.	114
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Analysis of ascertainment cases:

Advice regarding education	70
Vocational guidance	3
Personality test	...	...	...	...	2
Maladjusted	...	...	...	...	39
					— 114

Coaching cases:

Receiving coaching at end of year 1956	16
Discharged—satisfactory	5
	— 21
Home visits	5
School visits	56

C. Psychiatric Social Worker:

Social Histories	35
Interviews	258
School visits	6
Home and other visits	135

During the second half of the year we have been able to bring our establishment up to full strength. In addition, we have been most fortunate in securing the services of Dr. Hugh Elwell, of Hellingly, for one session per week. Although the volume of work shows a considerable increase over the previous year, we have not yet felt the full effect of this increased establishment, and at the end of the year the waiting list was again more than that of the previous year.

Staff changes—Mrs. Margaret Scott, M.A., Psychiatric Social Worker, took up duty on the 1st July, and Miss Smith, Secretary, having reached retiring age, left after ten years service. Miss C. Lynch was appointed to fill the vacancy.

In addition to the above analysis, the following work for East Sussex County Council has been done at this Clinic:

38 New Cases investigated (by Psychiatrists).

17 Cases treated or supervised.

53 Home and other visits (by Psychiatric Social Worker).

DORIS K. SMALL,

Psychiatrist in Charge.

8. HANDICAPPED CHILDREN

We are well aware of the claims of handicapped children to a normal life and education in an ordinary school whenever possible.

For these reasons, children continue to be carefully selected before recommending admission to our day open air school and boarding special schools. Those attending such schools are re-examined at frequent intervals to review their progress bearing in mind their transfer to an ordinary school.

The following table shows the number of children on the Register of Handicapped Pupils at the end of the year:

		<i>In Residential Special Schools</i>	<i>In Day Special Schools</i>	<i>In Ordinary Schools</i>	<i>In Hospital Schools</i>	<i>At Home</i>	<i>Total</i>
Partially Sighted ..	..	1	1	2	—	1	5
Blind ..	..	2	—	—	—	—	2
Partially Deaf ..	..	2	—	2	—	—	4
Deaf ..	..	7	—	—	—	—	7
Delicate ..	..	—	25	5	—	—	30
Physically Handi- capped ..	..	1	13	3	2	2	21
Educationally Sub- normal ..	..	2	36	—	—	—	38
Epileptic ..	..	—	—	—	—	—	—
Maladjusted ..	..	1	—	—	—	—	1

EPILEPTICS

There are 17 children who are known Epileptics attending ordinary schools in the town (not on the Register of Handicapped Pupils).

SWALLOW'S NEST DAY SCHOOL FOR E.S.N. PUPILS

			<i>Boys</i>	<i>Girls</i>
Number on Roll, January ...	...	...	27	3
Admissions ...	...	...	7	3
Leavers ...	...	...	7	1
Re-admissions ...	...	...	3	1
Number on Roll, December ...	...	...	30	6

Of the eight children who left, three were re-admitted during the year. The remaining five are accounted for as follows:

1 girl was excluded from school pending hospital investigation.

2 boys left the district.

2 boys had reached the statutory leaving age.

Also 1 child who had left in 1955 was re-admitted during the year.

Mr. S. Moss, Headmaster, reports:

In January the school was moved from Whitley Road to Friday Street and was re-named Swallow's Nest.

In July Miss E. Wilkes retired after many years service under the Education Committee. We are very pleased that her interest in the school is still keen, and we wish her a happy retirement.

During the year the Chelsea College has been a great help with our P.E. and swimming. The two lower classes have been to St.

Winifred's gymnasium every Monday and some students have helped with our swimming tuition. Throughout the Autumn Term they also sent a student to school on Tuesdays, and her help was much appreciated. During the year we had the following successes in swimming:

2 boys and 1 girl won Beginners' Certificates.

Mr. Roberts, our P.E. Organiser, has been a great help, and now that we have got complete use of the large Nissen Hut, and have equipped our elder children with P.E. kit, he is noticing an appreciable improvement in their standard of activity.

We have now got a good amount of new teaching equipment thanks to the willing co-operation of the Education Committee, and the children delight in using it.

The girls have regular weekly cookery and housewifery classes, thanks to the help of Mrs. S. Moss, and they are also doing needlework and gardening. The boys of the two top classes have woodwork, classroom crafts and gardening so that all our basic lessons are now taken in the mornings. The boys are making a lot of new apparatus and equipment for use in the school and the gardens.

In December we held an Open Day at which we had an exhibition of work, displays and a short Carol Service. We were pleased to welcome the Mayor (Ald. S. M. Caffyn), the Chairman of the Education Committee (Councillor Lebbon), and Councillor Mrs. Fordham. Numerous parents and friends attended, representing the Education Administrative Staff, the Medical Officer of Health's Department and the Chelsea P.E. College.

We also had a Christmas Party when it was a joy to see the children really enjoy themselves, and twenty of them went to see the Chelsea College pantomime.

With a slight increase expected in our number of children in 1957 our work will be able to be organised on a really sound educational basis, and so give the children the chances they deserve.

S. Moss, L.C.P.,
Headmaster.

EDUCATION ACT, 1944, *Section 57*

Children notified to the Local Health Authority:

Under Section 57 (3)	...	...	...	...	...	4
Under Section 57 (5)	...	...	...	...	...	1

OPEN AIR DAY SCHOOL, *Beechy Avenue, Eastbourne*

Forty-five children were on the register of the Open Air School at the beginning of the year and were classified as follows:

Delicate	...	...	...	...	...	31
Physically Handicapped	...	...	...	...	...	13
Partially Sighted	...	...	...	...	...	1
						—
						45
						—
Number of admissions	...	...	...	...	...	8

The children who left were placed as follows:

Transferred to Swallow's Nest Day E.S.N. School	1
Transferred to ordinary schools	9
School leavers	2
Left the district	1
	<hr/>
	13

The number of children on the register at the end of the year were:

Delicate	...	...	...	...	...	24
Physically Handicapped	...	...	...	...	...	13
Partially Sighted	...	...	...	...	...	2
Partially Deaf	...	...	...	...	...	1
						—
						40
						—

The average duration of stay was 21·8 months.

Miss B. A. Payne, Head Teacher, reports:

During 1956 several changes came to the Open Air School.

Early in February a class from St. Mary's Infant School came to occupy our Art Room, and they were joined after Easter by another class which necessitated our seniors using the school clinic as a classroom.

At the end of the summer term Mrs. Coope left us to take up a post at a residential school for Physically Handicapped Children in the Midlands, and in September we welcomed Mrs. Dicker to our staff.

A successful innovation has been the weekly visit of the whole school to Chelsea College for remedial exercises. The benefit derived from these has been most marked, and parents have expressed their appreciation, as they do of the swimming instruction under the enthusiastic leadership of Mr. J. Roberts, Organiser of Physical Education.

The Parents Evening was again successful. Mr. Roberts spoke on "Moving and Growing" and showed films to illustrate his talk.

A performance of "Hansel and Gretel" and a concert of "Carols by Candlelight" gave pleasure to both performers and audience. On these occasions parents and friends were able to see a little of the work of the school.

In September the school was inspected by Her Majesty's Inspectors, Mrs. Dawson and Mr. G. F. Keeney, accompanied by Dr. Huss also of the Ministry of Education.

One result of their visit has been the change in the name of the school.

"What's in a name?" Surely a great deal. We hope that the widespread misunderstanding of the purpose and function of the Open Air School may disappear as the Downs' School endeavours to meet the need, physically and educationally, of the children who can benefit from its special facilities.

B. A. PAYNE,
Headmistress.

9. SPECIAL TUITION (HOME AND HOSPITAL)

One boy aged 10 years suffering from Haemophilia and one boy aged 5 years suffering from residual paralysis after Poliomyelitis, were unable to attend school. The authority provided a special tuition for them at home.

Four children received education while in Hospital Special Schools:

					Males	Females
Chailey Heritage Craft Hospital School,						
Chailey	...	...	...	...	1	—
Goldie Leigh Hospital School, Abbey						
Wood	...	...	...	...	—	1
Heatherwood Hospital Special School,						
Ascot	...	...	...	...	2	—

10. DENTAL CLINIC

REPORT OF THE PRINCIPAL SCHOOL DENTAL OFFICER SESSIONS

The number of sessions devoted to inspection and treatment were:

Principal School Dental Officer	...	...	...	465
School Dental Officer	...	...	...	395

Of these, 56 sessions were devoted to inspections and 853 to treatment. In addition, the Orthodontic Specialist carried out 49 sessions.

GENERAL SERVICES

At the 56 sessions devoted to periodic inspections, 6,165 children were seen in the following age groups:

Number of individual children inspected during 1956

Age	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	Totals
Inspected ..	53	472	523	470	645	762	628	585	576	501	484	256	125	56	24	5	6,165

1st Inspection

Age	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	Totals
Inspected ..	53	472	523	470	645	762	628	558	557	488	469	246	117	49	20	4	6,061

2nd Inspection

Age	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	Totals
Inspected ..	-	-	-	-	-	-	15	229	280	253	227	107	35	25	11	3	1,185

104 children were seen for the first time at the second inspection at the Grammar and Ratton Secondary Schools.

At the request of parents, a further 121 children were inspected at the Clinic. Of the gross total of 6,286 children inspected 2,786, a percentage of 44, were found to require treatment. The number of sessions devoted to treatment was 853 and 2,232 children made 7,533 attendances.

The following is a summary of the treatment given:

Fillings:

Permanent teeth	...	...	...	...	3,148
Temporary teeth	...	...	...	...	359
					— 3,507

Number of teeth filled

Permanent teeth	...	...	...	...	2,272
Temporary teeth	...	...	...	...	310
					— 2,582

Extractions:

Permanent teeth	...	...	...	...	425
Temporary teeth	...	...	...	...	1,473
					— 1,898

Administration of general anaesthetics ... 1,063

Other operations:

Permanent teeth	...	...	...	...	2,627
Temporary teeth	...	...	...	...	613
					— 3,240

The anaesthetic in use is Nitrous Oxide and Oxygen from a McKesson apparatus.

Forty-nine clinic sessions were held throughout the year at the Central Dental Clinic:

Cases commenced during the year	64
Cases carried forward from previous year	76
Cases completed during the year	37
Cases discontinued during the year	16
Pupils treated with appliances	80
Removable appliances fitted	72
Fixed appliances fitted	37
Total attendances	1,144

Number of pupils supplied with artificial dentures ... 16

During the year dental inspections were carried out at all the schools maintained by the Authority, and in the case of two of the largest schools; namely the Grammar School and Ratton Secondary, it was found possible to carry out a second inspection after an interval of six months. It was apparent at these inspections that the general dental condition of the children here is good, but nevertheless from the numbers referred for treatment, it is obvious that the regularity of these inspections must be maintained. Too much damage, both from caries and from mal-occlusion, can occur in a child's mouth in twelve months, for us to view with complacency the attainment of one annual inspection. The ideal to aim at should be inspections at six monthly intervals and I feel that we are beginning to make some progress towards this goal.

Of those inspected 44 per cent. were referred for treatment, and 80 per cent. of those referred were actually treated. Two very welcome trends in the years' work were firstly, a decrease in the number of teeth extracted and secondly, an increase in the number of temporary teeth filled. We have had in the past to concentrate our conservative work on the permanent dentition, but now that the position here is more under control, we can afford more time for repair work on the deciduous teeth—this so often undervalued stage of the dentition. This retention of the deciduous dentition is of great concern to the Orthodontist since many cases of mal-occlusion can be attributed to early loss of the temporary molars, and if we can decrease the interval between inspections, our chances of saving more of these teeth are greatly enhanced since their successful conservation depends very greatly on the early diagnosis of the caries.

Eight hundred and four sessions were devoted to routine treatment carried out mainly at the Avenue House Clinic. However, to avoid loss of school time, conservative work was carried out on the school premises in the cases of Ratton Secondary, Hampden Park Secondary, Highfield Primary and Langney Primary Schools.

The Orthodontic Clinic under the direction of Mr. Norman Gray, the visiting Orthodontic Specialist, held 49 sessions, and the

demand for this treatment still continues to be heavy. At these sessions, Mr. Gray was assisted by his partner, Mr. H. G. Griffith, and by the School Dental Officer, Mr. J. W. Martin. The weekly class for breathing exercises run in conjunction with the Orthodontic Clinic has continued its very valuable contribution towards the amelioration of the Orthodontic problem and has been most efficiently administered by the visiting students from the Chelsea College of Physical Education. In addition to the special Orthodontic Clinics, Mr. Gray has also been available for consultation regarding some of the less serious cases of mal-occlusion which have received treatment at the ordinary sessions. At these sessions, 38 children made 372 attendances for Orthodontic work.

During the year, a Kingsway Dental X-Ray apparatus was installed, and has proved a most useful and valuable addition to our equipment. The advantage of having an apparatus on the premises ready for immediate use, has proved of inestimable benefit particularly in those urgent cases where all treatment is held up pending X-ray investigation. During a period from May until the end of the year, one hundred and thirty-four children have been X-rayed, and a total of two hundred and ninety-two films have been taken.

In addition to work already recorded in the statistical tables, three crowns were constructed and root treatments carried out on nineteen teeth.

As I have stated in previous reports, no panacea for dental disease is yet in sight and although some time ago, the British Dental Association publicly repudiated the therapeutic claims made for some branded toothpastes, we must still rely on their purely cleansing properties, a strict attention to oral hygiene and the consumption of a suitable diet, as our main defences in the battle against dental caries.

MAURICE G. BERRY, L.D.S., R.C.S.
Principal School Dental Officer.

11. DIFFICULT AND PROBLEM FAMILIES

(a) The conditions under which 33 families were living were sufficiently unsatisfactory to justify the continued attention of School Nurses, Welfare Workers and other officers of the Department.. In the case of 8 of these families, conditions were at times most unsatisfactory and considerable time and attention was devoted to them. Each case is so different and the problems so complex that a short paragraph such as this can give no true picture of the hours of tiring work such a family can need.

(b) THE NATIONAL SOCIETY FOR THE PREVENTION OF CRUELTY TO CHILDREN.

Mr. B. H. Rich, the local inspector, assisted the Department in 9 cases involving 30 children, of whom 8 were of school age.

Seventy-two visits were paid to these families. The cases were classified as:

Neglect	...	...	...	...	...	...	3
Ill-treatment	...	...	...	...	...	...	2
Beyond control	...	...	...	...	...	...	3
							—
							8
							—

The Inspector also dealt with 89 other families. Of the 230 children in these families, 189 were of school age.

The classifications were:

Neglect	...	...	...	...	...	...	45
Ill-treatment and assault	...	...	...	...	...	...	8
Beyond control	...	...	...	...	...	...	3
Moral Danger	...	...	...	...	...	...	3
Advice or aid sought	...	...	...	...	...	...	29
Unregistered foster child	...	...	...	...	...	...	1
							—
							89
							—

(c) JUVENILE CRIME. The Chief Constable, Mr. R. W. Walker, has kindly supplied the following statistics:

						<i>Males</i>	<i>Females</i>
Sent to Approved School	...	...	...	...	...	1	—
Probation	...	...	...	...	...	12	3
Convicted—conditional discharge	...	...	...	...	...	1	—
Otherwise disposed of	...	...	...	...	...	2	—
Dismissed	...	...	...	...	...	1	1
						—	—
						17	4
Cautions	...	...	...	...	...	34	4
						—	—
						51	8
						—	—

12. EMPLOYMENT OF CHILDREN

In connection with these Byelaws 152 children were examined and the necessary certificates provided.

The Department in close co-operation with the Youth Employment Service completed during the year 366 medical reports in respect of children who left the secondary modern schools.

13. PROVISION OF CLOTHING

EDUCATION (MISCELLANEOUS PROVISIONS) ACT, 1948, SECTION 5

Various articles of clothing were supplied by the Education Authority to 44 children from 23 families. Many articles of clothing were also obtained from voluntary sources, mainly the Women's Voluntary Services.

14. SCHOOL MEALS AND MILK

During 1956 the number of mid-day meals served was 640,515 of which 32,025 were free. During the previous year 616,634 meals were served, 41,591 being free. 1956 saw the highest total of meals ever served under the jurisdiction of the Eastbourne Education Authority, although in October 1955 the highest daily average for any month was achieved. It was also the year with the smallest number of free meals.

During the year frequent checks have been made of the nutritional value of the meal and the amounts used compared with the quantities recommended by the Ministry of Education in Circular 290.

From September the few boys left at the Technical School have been going to the Grammar School Canteen for their lunch. The kitchen at Trinity Church of England School was closed at the end of the year and the comparatively few children left there are receiving their dinners from the Central Kitchen. This means that there are now only ten schools with their own kitchens, the majority of the remainder being served by the Central Kitchen now working to its capacity.

The Milk-in-Schools Scheme has continued to function and one-third pint bottles of milk are provided for all primary and secondary school children who wish to have them. Since September 1st, 1956, the Authority has also been responsible for the administration of this scheme for the non-maintained schools.

The following table shows the number of children in maintained schools taking meals and milk on a given day in October:

	PRIMARY AND SECONDARY DEPARTMENTS					
	MEALS				MILK	
	<i>No. of Children in Schools</i>	<i>Free</i>	<i>Paid</i>	<i>Percentage taking Meals</i>	<i>Total taking Milk</i>	<i>Percentage taking Milk</i>
<i>A day in October</i>						
1956	6,306	114	3,036	50·7	5,557	88·1
1955	6,374	179	3,208	53·1	5,419	85·0

15. NOTIFICATION OF INFECTIOUS DISEASE

The following notifications of infectious disease in school children were received in the department:

Scarlet Fever	...	...	...	...	...	17
Whooping Cough	...	...	...	...	...	13
Acute Poliomyelitis (paralytic)	...	...	...	...	...	1
Measles	...	...	...	...	...	267
Dysentery	...	...	...	...	...	4

16. TUBERCULOSIS

No cases of tuberculosis were notified in children of school age during the year.

B.C.G. VACCINATION AGAINST TUBERCULOSIS

For some years children known to be contacts of cases of tuberculosis have been offered this vaccine (Bacille Calmette Guérin) during the routine preventive measures taken by the Chest Clinic staff and in this connection eleven children of school age were vaccinated. More children were known contacts but many are found after a simple skin test to have acquired a degree of immunity already, and it is only to those whose skin test shows no such immunity that the vaccine is given.

The results of a very extensive trial by the Medical Research Council published during the year confirmed that B.C.G. confers a considerable degree of protection. Consequently, it was decided to offer it to all thirteen-year-old children in the Borough. Local general practitioners were kept fully informed of the scheme and of details regarding children on their own lists.

Details and application forms were sent to the parents of 613 children. A total of 417 received the preliminary skin test, 28 of these being from private schools. Fifty-six (8 from private schools) gave a positive skin reaction indicating past infection. They were not vaccinated. Apart from five already known to the Chest Clinic and two who missed the appointment, these "positive" children were sent to the X-Ray Unit in Brighton where one was found to need supervision by the Chest Clinic, two others had evidence of lung tuberculosis so slight as to require no action, and one was found to have an abnormality of the heart.

The remaining 361 children were vaccinated.

17. DIPHTHERIA IMMUNISATION

The number of children between the ages of 5 and 15 years immunised by the medical staff of the department and those in these age groups in respect of whom records were sent in by general medical practitioners are as follows:

	<i>By Medical Staff of the Department</i>	<i>By General Medical Practitioners</i>	<i>Totals</i>
Primary Immunisation	12	9	21
Reinforcing Doses ...	574	154	728

According to our school medical records at the end of the year, 5,718 out of 6,601 on the school registers had been immunised, giving a percentage of approximately 86.

18. DEATHS OF SCHOOL CHILDREN

No child between the ages of 5 years and 15 years died during the year.

19. TRAINING COLLEGES

We are very fortunate in the valuable help we receive from the staff and students of the Chelsea College of Physical Education in regard to handicapped children and those with minor postural and orthopaedic defects. Special classes are held in the schools, clinics and swimming baths where disabilities are given individual and personal attention. There is close liaison with the staff of the department who give lectures on health subjects to the students.

In addition 3 sessions at Eastbourne Training College and 11 sessions at Chelsea College were held during the year for medical examinations.

MINISTRY OF EDUCATION MEDICAL INSPECTION RETURNS

Year ended 31st December, 1956
Local Education Authority - EASTBOURNE

TABLE I

Medical Inspection of Pupils attending Maintained Primary and Secondary Schools (including Special Schools)

(This return refers to a complete calendar year)

A.—PERIODIC MEDICAL INSPECTIONS

Age groups inspected and Number of Pupils examined in each:

Entrants	779
10 Year Old Group	476
14 Year Old Group	473
	<hr/>
Total	1,728
Additional Periodic Inspections†	172
	<hr/>
Grand Total	1,900
	<hr/>

B.—OTHER INSPECTIONS

Number of Special Inspections	1,022
Number of Re-inspections	1,135
	<hr/>
Total	2,157
	<hr/>

C.—PUPILS FOUND TO REQUIRE TREATMENT

Number of Individual Pupils found at Periodic Medical Inspection to Require Treatment (excluding Dental Diseases and Infestation with Vermin).

Notes.—(1) Pupils found at Periodic Medical Inspection to require treatment for a defect should not be excluded from this return by reason of the fact that they are already under treatment for that defect.

(2) No individual pupil should be recorded more than once in any one column of this Table, and therefore the total in column (4) will not necessarily be the same as the sum of columns (2) and (3).

<i>Age Groups Inspected</i> (1)	<i>For defective vision excluding squint</i> (2)	<i>For any of the other conditions recorded in Table III</i> (3)	<i>Total Individual Pupils</i> (4)
Entrants	38	160	173
10 Year Old Group ..	75	85	135
14 Year Old Group ..	66	45	96
Total ..	179	290	404
Additional Periodic Inspections† ..	18	18	34
Grand Total ..	197	308	438

† E.g., Pupils at special schools or who missed the usual periodic examination.

D.—CLASSIFICATION OF THE PHYSICAL CONDITION OF PUPILS INSPECTED IN THE AGE GROUPS RECORDED IN TABLE I.A.

<i>Age Groups Inspected</i> (1)	<i>Number of Pupils Inspected</i> (2)	<i>Satisfactory</i>		<i>Unsatisfactory</i>	
		<i>No.</i> (3)	<i>% of Col. 2</i> (4)	<i>No.</i> (5)	<i>% of Col. 2</i> (6)
Entrants	779	760	97·56	19	2·44
10 Year Old Group ..	476	466	97·90	10	2·1
14 Year Old Group ..	473	463	97·89	10	2·11
Additional Periodic Inspections ..	172	166	96·51	6	3·49
Total	1,900	1,855	97·63	45	2·37

Note.—The figures in Column (2) should normally be the same as those detailed under Table I.A.

NOTE ON TABLE I

The arrangements made by the Authority for the medical inspection of pupils attending schools maintained by the Authority are those prescribed in Regulation 10(1)(a) of the School Health Service and Handicapped Pupils Regulations, 1953, which requires:

“a general medical inspection of every pupil on not less than three occasions at appropriate intervals during the period of his compulsory school age and other medical inspections of any pupil on such occasions as may be necessary or desirable:

Provided that there may be fewer than three general medical inspections for any pupil who attends schools maintained by the Authority for less than the period of his compulsory school age or, if the Minister approves, for all pupils.”

TABLE II

Infestation with Vermin

(i) Total number of individual examinations of pupils in schools by the school nurses or other authorised persons	...	...	...	...	...	...	12,909
(ii) Total number of <i>individual</i> pupils found to be infested	...	...	...	...	...	...	48
(iii) Number of individual pupils in respect of whom cleansing notices were issued (Section 54(2), Education Act, 1944)	...	...	...	...	...	...	—
(iv) Number of individual pupils in respect of whom cleansing orders were issued (Section 54(3), Education Act, 1944)	...	...	...	...	...	...	—

Notes.—All cases of infestation, however slight, should be recorded. The numbers recorded at (ii) (iii) (iv) above should relate to individual pupils and not to instances of infestation.

TABLE III

Return of Defects found by Medical Inspection in the Year Ended 31st December, 1956

Note.—All defects noted at medical inspection as requiring treatment should be included in this return, *whether or not this treatment was begun before the date of the inspection.*

A.—PERIODIC INSPECTIONS

Defect Code No.	Defect or Disease	PERIODIC INSPECTIONS				TOTAL (including all other age groups inspected)	
		Entrants		Leavers		Requiring Treat- ment (7)	Requiring Observa- tion (8)
		Requiring Treat- ment (3)	Requiring Observa- tion (4)	Requiring Treat- ment (5)	Requiring Observa- tion (6)		
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
4	Skin	5	28	6	16	25	58
5	Eyes:						
	a. Vision ..	38	139	66	12	*197	223
	b. Squint ..	23	12	—	1	42	22
	c. Other.. ..	5	9	3	4	12	26
6	Ears:						
	a. Hearing ..	5	26	1	6	6	48
	b. Otitis Media ..	6	19	1	4	8	31
	c. Other.. ..	—	2	3	2	5	5
7	Nose and Throat	31	168	2	5	40	204
8	Speech	21	29	1	4	22	41
9	Lymphatic Glands	12	93	—	1	14	108
10	Heart	1	10	—	4	1	16
11	Lungs	9	32	—	4	19	60
12	Developmental:						
	a. Hernia ..	2	6	—	1	4	11
	b. Other.. ..	2	25	—	1	4	45
13	Orthopaedic:						
	a. Posture ..	4	11	5	14	16	41
	b. Feet ..	7	9	3	3	12	18
	c. Other.. ..	48	54	12	20	83	116
14	Nervous system:						
	a. Epilepsy ..	3	3	—	1	4	5
	b. Other.. ..	—	2	—	—	—	3
15	Psychological						
	a. Development	—	10	—	5	1	18
	b. Stability ..	4	58	2	5	14	94
16	Abdomen ..	1	4	—	—	1	4
17	Other	6	15	5	12	22	40

Note.—*This figure should normally be the same as that shown as the grand total of Column (2) of Table I.C. ("For defective vision (excluding squint)").

B.—SPECIAL INSPECTIONS

Note.—All defects noted at medical inspection as requiring treatment should be included in this return, *whether or not this was begun before the date of the inspection.*

Defect Code No. (1)	Defect or Disease (2)	Special Inspections	
		Requiring Treatment (3)	Requiring observation (4)
4	Skin	43	2
5	Eyes— <i>a.</i> Vision	101	26
	<i>b.</i> Squint	1	—
	<i>c.</i> Other	9	2
6	Ears— <i>a.</i> Hearing	2	5
	<i>b.</i> Otitis Media	—	—
	<i>c.</i> Other	6	2
7	Nose and Throat	27	8
8	Speech	24	7
9	Lymphatic Glands	2	—
10	Heart	1	3
11	Lungs	15	3
12	Developmental—		
	<i>a.</i> Hernia	—	—
	<i>b.</i> Other	12	—
13	Orthopaedic—		
	<i>a.</i> Posture	3	1
	<i>b.</i> Feet	5	—
	<i>c.</i> Other	50	12
14	Nervous system—		
	<i>a.</i> Epilepsy	6	4
	<i>b.</i> Other	6	5
15	Psychological—		
	<i>a.</i> Development	6	4
	<i>b.</i> Stability	49	4
16	Abdomen	—	—
17	Other	90	12

TABLE IV

Treatment of Pupils attending Maintained Primary and Secondary Schools (including Special Schools)

Notes.—In Groups 1, 2 and 3 treatment includes all defects treated or under treatment during the year by the Authority's own staff, however brought to the Authority's notice, (*i.e.*, whether the periodic inspection, special inspection, or otherwise during the year in question or previously), or provided otherwise than by the Authority (*i.e.* known by the Authority to have been provided, including treatment carried out in school clinics by the Regional Hospital Board).

GROUP 1.—EYE DISEASES, DEFECTIVE VISION AND SQUINT

	<i>Number of cases known to have been dealt with</i>	
	<i>By the Authority</i>	<i>Otherwise</i>
External and other, excluding errors of refraction and squint	43	53
Errors of refraction (including squint) ..	—	464
Total	43	517
Number of pupils for whom spectacles were prescribed	—	281

GROUP 2.—DISEASES AND DEFECTS OF EAR, NOSE AND THROAT

	<i>Number of cases known to have been treated</i>	
	<i>By the Authority</i>	<i>Otherwise</i>
Received operative treatment		
(a) for diseases of the ear	—	2
(b) for adenoids and chronic tonsillitis	—	69
(c) for other nose and throat conditions	—	—
Received other forms of treatment ..	16	226
Total	16	297
Total number of pupils in schools who are known to have been provided with hearing aids		
*(a) in 1956	<i>Information not available ditto</i>	
(b) in previous years		

*Note.—A pupil recorded under (a) above should not be recorded at (b) in respect of the supply of a hearing aid in a previous year.

GROUP 3.—ORTHOPAEDIC AND POSTURAL DEFECTS

	<i>By the Authority</i>	<i>Otherwise</i>
Number of pupils known to have been treated at clinics or out-patient departments ..	—	65

GROUP 4.—DISEASES OF THE SKIN (excluding uncleanness for which see Table II)

					<i>Number of cases treated or under treatment during the year by the Authority</i>
Ringworm— (i) Scalp	..	..	..	..	—
(ii) Body	..	..	..	..	3
Scabies	..	..	..	..	2
Impetigo	..	..	..	..	25
Other skin diseases	..	..	..	..	290
Total	..	..	..	..	320

GROUP 5.—CHILD GUIDANCE TREATMENT

Number of pupils treated at Child Guidance Clinics under arrangements made by the the Authority	..	..	..	..	By Psychiatrist	86
					By Psychologist	114

GROUP 6.—SPEECH THERAPY

Number of pupils treated by Speech Therapist under arrangements made by the Authority		71
---	--	----

GROUP 7.—OTHER TREATMENT GIVEN

(a) Number of cases of miscellaneous minor ailments treated by the Authority	..	191
(b) Pupils who received convalescent treatment under School Health Service arrangements	..	—
(c) Pupils who received B.C.G. vaccination	..	361 (under School Health Service)
		12 (under Chest Clinic)
(d) Other than (a), (b) and (c) above (specify)	..	—
Totals (a)—(d)	..	564

TABLE V

Dental Inspection and Treatment carried out by the Authority

(1) Number of pupils inspected by the Authority's Dental Officers:					
(a)	At Periodic Inspections	...	...	...	6,165
(b)	As Specials	...	...	...	121
Total (1)					6,286
(2)	Number found to require treatment	...	...	...	2,786
(3)	Number offered treatment	...	...	...	2,786
(4)	Number actually treated	...	...	...	2,232
(5)	Number of attendances made by pupils for treatment, including those recorded at heading 11(h)	...	...	...	7,533
(6)	Half days devoted to: Periodic (School) Inspection	...	...	...	56
	Treatment	...	...	...	853
Total (6)					909
(7)	Fillings: Permanent Teeth	...	...	...	3,148
	Temporary Teeth	...	...	...	359
Total (7)					3,507
(8)	Number of teeth filled: Permanent Teeth	...	...	...	2,272
	Temporary Teeth	...	...	...	310
Total (8)					2,582
(9)	Extractions: Permanent Teeth	...	...	...	425
	Temporary Teeth	...	...	...	1,473
Total (9)					1,898
(10)	Administration of general anaesthetics for extraction	...	...	...	1,063
(11) Orthodontics:					
(a)	Cases commenced during the year	...	...	...	64
(b)	Cases carried forward from previous year	...	...	...	76
(c)	Cases completed during the year	...	...	...	37
(d)	Cases discontinued during the year	...	...	...	16
(e)	Pupils treated with appliances	...	...	...	80
(f)	Removable appliances fitted	...	...	...	72
(g)	Fixed appliances fitted	...	...	...	37
(h)	Total attendances	...	...	...	1,144
(12)	Number of pupils supplied with artificial dentures	...	...	...	16
(13)	Other operations: Permanent Teeth	2,627
	Temporary Teeth	613
Total (13)					3,240

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